12 January 1989

A publication of the
News and Public Affairs Office
of Massachusetts General Hospital
Bartlett 9, Extension 2206

MGH HOTLINE

Memorial service to remember MGH Registrar

A memorial service will be held for Teresa F. Cunningham on January 17 at 3:00 pm in the Shriners Burns Auditorium. Ms. Cunningham, who passed away in October, was the hospital's registrar for eight years. She came to the MGH in 1973 as a senior secretary in the Department of Anesthesia and later worked as a patient care representative.

Ms. Cunningham was active in her community and served as president and secretary of the Allston Civic Association.
She was on the board of the Joseph M. Smith Community Health Center in Brighton for 12 years, and president of the Taft Junior High School Home & School Association. She also served on the board of McNamara Housing for the Elderly. At Boston's 350th anniversary she was 1 of 100 Bostonians to receive the Boston 350 Award.

MGH General Director Dr. J. Robert Buchanan, Dr. J. Bucknam McPeek of Anesthesiology, friend and colleague Mrs. Eleanor Hackett, and Dr. Allan J. Hamilton of Neurosurgery will speak at the memorial service. The Rev. Dr. Phillip King and Father Michael McElhinny will officiate. A memorial mass in the MGH Chapel will follow the service.

What's Happening

Person to Person: Living With Cancer

The Social Service Department will offer free support groups for cancer patients, their families and friends on six consecutive Thursday evenings from 7:00 - 8:30 pm beginning on January 19. Call Evelyn Malkin, LICSW, Wednesday through Friday at 726-8187.

Research studies need volunteers

The reproductive Endocrine Unit has an immediate need for healthy women, ages 18-40, with regular menstrual cycles and on no medication, to participate in ongoing research studies. Compensation is available. Call Helen Whitney, RN, at ext. 5387 for details.

Blood level lab moves

The Antibiotic Blood Level Laboratory has been incorporated into the Bacteriology Laboratory on Gray 4. Antibiotic Blood Level specimens should be delivered to the Bacteriology Laboratory receiving window. Specimens will continue to be tested Monday - Saturday with the exception of non-Monday holidays. For more information call ext. 3830, or ext. 3613.

Call for nominations

Nominations are being accepted for the *Oncology Nursing Career Development Award.* Funded by the Friends of the MGH Cancer Center, the award recognizes a professional staff nurse for meritorious practice and provides financial assistance for continuing education programs. The $1000 award, which will be granted during National Nurses Week in May, is designed to recognize the critical role of the oncology nurse in the management of the cancer patient.

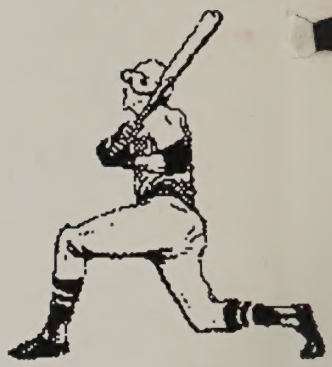
Nominees must be MGH registered nurses functioning at the staff level in either inpatient or outpatient settings. The nominee must meet the following criteria:

- provides direct patient care
- demonstrates consistent excellence in delivering care to cancer patients
- serves as a role model to others in the profession
- demonstrates commitment to professional development.

The Friends of the MGH Cancer Center will only consider nominations submitted by April 3. Contact Deborah Mayer, RN, MSN, at ext. 8548 for nomination materials or more information.

Basement renovations

A portion of the White Building Basement corridor has recently been renovated, compliments of the Buildings and Grounds Department. A good deal of time and hard work went into the project so we all may enjoy a more pleasant environment. Please help keep this area looking good so that we may continue to enjoy it in the months and years ahead.



A Smashing Win

The Radiology Department's XRAYS won the MGH softball league championship this year. The team is composed of radiologists, technologists, and personnel from the Security Department. They beat HVAC (Heating Ventilation and Air Conditioning), with a score of 6 - 5 in the final game of a three game series. Ronald Heitman is team captain, and ace pitcher Dr. Joseph Simeone was awarded the game ball for his outstanding performance.

Beat the toll blues—car pool!

"Congested and all stopped up" just about describes Boston traffic. And with the impending construction of the Central Artery/Third Harbor Tunnel, it's due to get worse. However, the Massachusetts Turnpike Authority has a solution. Its Car Pool Pass Program features substantially reduced toll rates for cars with three or more passengers and can save individual commuters up to $2,000 per year. The pass is purchased annually and can be used at any time. Free car pool match-ups can be arranged through CARAVAN; call 227—POOL. Passes are also available for users of the Callahan/Sumner Tunnels.

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Barbara Morrison, LICSW, Supervisor of the Family Care Program, has been involved with the program since its inception ten years ago.

An Anniversary for the Family Care Program

Last month the MGH marked the 10th anniversary of the Family Care Program with a reception for its participants and the health care professionals involved with the program. Conceived by the late Eleanor Clark, the former Director of the Social Service Department at the MGH, the Family Care Program was the first program in the country to provide foster care for elderly people with medical problems.

"It was really the first of its kind," said Barbara Morrison, LICSW, supervisor of the program. "Family foster care had been used successfully by a Veterans Administration Hospital for people with psychiatric problems but never for people with medical problems."

Through the program, an individual or family provides room, board, and personal care assistance for an elderly person who cannot manage alone, yet does not need the more structured environment of a nursing home.

In 1978, after the MGH Social Service Department obtained private foundation grants to pilot an adult foster care program, Senator William Bulger and Representative William Keating introduced a bill in the Massachusetts legislature for Medicaid funding for the pilot project. The program was expanded throughout the state in 1981, and the following year the Senate Ways and Means Committee budgeted money for the Department of Elder Affairs to start new adult foster care programs each year. There are now 13 such programs in the state. Though the program is geared toward elderly people, it also provides placement and services for younger disabled adults.

The MGH Social Service Department administers the

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Making a movie

This week is incident reporting week and the MGH hailed the event with the release of a new film co-produced by the hospital and featuring MGH employees as the principal cast. The MGH has produced a film on incident reporting in conjunction with Commonwealth Films, a local production company which specializes in docudrama. Docudrama uses real-life events and authentic locations to produce dramatically realistic training films.

The purpose of the film, which is titled *Just the Facts*, is to help employees understand the benefits of correctly using the incident reporting system.

"The reason we made the movie is to continue to maintain and enhance a system that will improve the ability to deliver quality care to patients and provide a safe working environment for all employees," says Klara Sztucinski, Manager of Training and Develop-

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Harold DeMonaco, Director of Pharmacy, was right on cue during the filming of *Just the Facts*.

Hospitals join petition drive to protect Medicare

It all comes down to dollars and sense. Budget cuts in Medicare are hitting hospitals hard, and if unchecked, will affect patient care. Since 1981 the federal government has cut $30 billion from the Medicare budget. Medicare contributions to medical education have fallen 25 percent, and contributions to hospital capital costs have dropped 15 percent. And by all appearances, 1990 will herald further cuts.

In an effort to dissuade Congress from further Medicare cuts, Dr. J. Robert Buchanan joined other hospital administrators and the president of the Massachusetts Hospital Association in recent hearings before the House Select Committee on Aging. The MGH is now collecting signatures for a petition to persuade Congress to protect Medicare.

As hospitals continue to face fiscal constraints caused by labor shortages and tight caps on revenues, one more cut is maybe more than we can take. Estimates show that Massachusetts hospitals will lose $150 million this year on Medicare shortfalls.

In his testimony Dr. Buchanan noted that like most hospitals, the MGH had a Medicare surplus in fiscal year 1986. This year, however, we will lose money on Medicare cases. With Medicare accounting for 35 percent of our total patient care revenue, the estimated $2.5-3 million Medicare shortfall projected for fiscal 1989 will hurt.

Unlike hospitals in Massachusetts, those in other states can make up those losses by charging non-Medicare patients more. But Massachusetts controls the charges on non-Medicare patients as well. "Reductions in Medicare payments do not affect Medicare patients specifically but impact the entire hospital budget," says Mr. Richard R. Crater, Director of Fiscal Affairs. "Ultimately all patients will have a lower level of service. We won't have as many nurses. We won't be able to bring in new programs or new technologies."

The problem is that Medicare reimbursement is not keeping pace with the rising cost of treating patients. For instance, since 1986, the average cost of an admission at a Massachusetts hospital has risen more than 20 percent while the average Medicare reimbursement

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Movie

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ment. Ms. Sztucinski has worked in theater and film and, with Harriet Chaney, RN, PhD, of Staff Development, coordinated the production of the film under the auspices of the Patient Care Assessment Educational Committee.

The Utilization Management/Quality Assurance Department reviews hospital incident reports to identify problems and trends and then reports to the appropriate person or quality assurance committee who in turn will coordinate the solution to the problem.

The film will be used for training sessions on incident reporting here in the hospital and will be available to other health care facilities for training purposes.

Camera crews filmed throughout the hospital for a week. The resulting film dramatizes six typical situations which involve patients, employees, and visitors and require incident reporting. In one case, an employee sustains a needle-stick injury. Failure to fill out an incident report delays this employee's workers compensation claim. In another situation, a design problem in a crucial piece of equipment is uncovered after several departments file malfunction reports. And in another case a visitor slips and falls.

Ms. Sztucinski says the production of the film was a resounding success, mostly due to the cooperation and goodwill of MGH employees who participated on camera and behind the scenes. For instance, employees lent their offices as locations for scenes. And MGH departments helped with lighting and sets, and assisted in other ways to help accommodate the film crews and the shooting schedules.

Ms. Sztucinski relates a funny moment that exemplifies the realistic quality of the film and the professional and caring attitude she finds common among MGH employees. When an actor used

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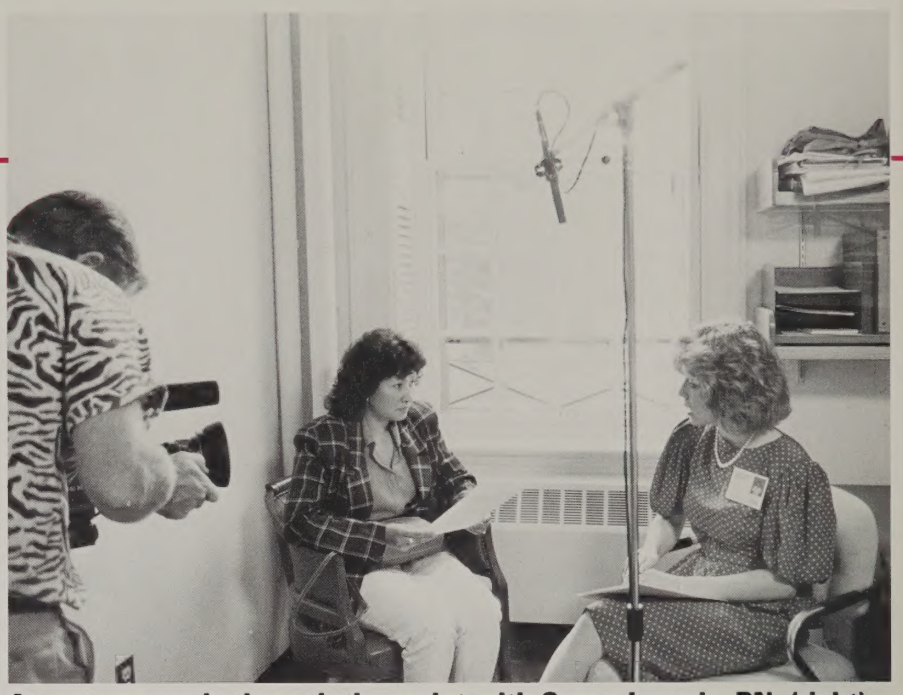

An actress reads through the script with Susan Loomis, RN, (right) a workers compensation nurse.

Medicare

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per admission has crept a bare 4 percent. Over the past two years, the average cost of an admission at the MGH has increased 24 percent while the Medicare reimbursement per case has only increased 2.9 percent.

Medicare's prospective payment system provides hospitals with a fixed fee for a specific diagnosis but does not reimburse for the actual cost of care. Under this system, the financial health of a hospital often depends upon increasing admissions and discharging patients as quickly as possible. However, a recent Department of Health and Human Services study found that, despite these fiscal pressures, very few hospitals were discharging patients "quicker and sicker." Like the MGH, many other institutions across the country made a commitment to keep patients as long as medically necessary, whether Medicare would reimburse for the additional time or not. Unfortunately, the hospitals

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hospital's program and provides a team of social workers and nurses to work with the elderly people and their host families. The program provides acitivity groups for the elders, coordinates their medical care, and, when needed, refers them to community services like adult day-health centers. The program also provides a 24-hour emergency-call service for families.

Health care providers at the MGH refer many of the patients served by the Family Care Program. However, Ms. Morrison points out, they get a number of referrals from community agencies as well. "In addition to the referrals from MGH inpatient and outpatient departments," she says, "we get referrals from other hospitals, home care associations like the Visiting Nurses Association, and nursing homes."

Social Service selects carefully the families which participate and trains them for their participation. Foster families receive a monthy stipend from Medicaid and provide support to elders by cooking their meals, administering medicines, or assisting with the shopping or other daily activities. All of the clients are reasonably independent in their physical care.

"Many of these people have families," says Ms. Morrison, "who may be able to assist their relative in many ways but for a variety of reasons cannot provide the living situation that is needed. They may be constrained by demands at work or other family responsibilities, or the relationship may be strained.

"The purpose of the program," says Ms. Morrison, "is to keep elderly people as independent as possible and to keep them in the community where they can participate as much as the are able."

Since its inception ten years ago, the Family Care Program has served over 128 patients. "We usually have about 30 people in placement at any one time," says Ms. Morrison. "and some people have been in placement for many years."

Joe McCarthy, a native of East Boston, has been involved with the Family care program for eight years now. He shares a home with Lilian Ventura, who provides room and board and some assistance for Mr. McCarthy. "I had been living by myself for a long time," says Mr. McCarthy. "And I used to travel a lot, until I became ill and the roof fell in on me. I realized I wasn't going to be able to move

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Joe McCarthy enjoys the conversation of friends at the 10th anniversary celebration for the Family Care Program.

What's Happening

Artwork donation honors Eleanor Clark

Meredyth Hyatt Moses, owner and director of the Clark Gallery in Lincoln, has donated artwork to the MGH in honor of Eleanor Clark, former Director of the Department of Social Services at the MGH. Ms. Moses had co-owned the gallery with Ms. Clark and Grace Nichols. A reception recognizing the donation was organized by Associate Directors of Social Services Ann Daniels, LICSW, and Renie Rutchick, LICSW.

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Left to right are Meredyth Hyatt Moses, James H. Clark, Ms. Clark's nephew who donated the framing of the pieces, and Grace Nichols.

Movie

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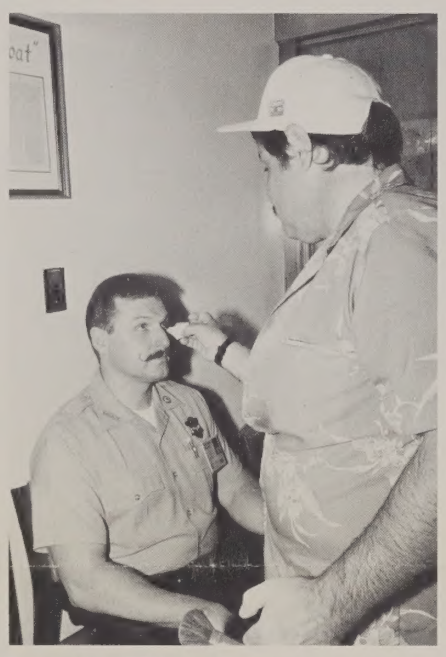
makeup to create a mock injury for a scene in the Emergency Ward, an MGH staff person mistaking the injury as real, began looking for a triage nurse. It took some convincing to assure the MGHer that the actor wasn't an injured patient in distress.

Says Ms. Sztucinski, "The level of cooperaton demonstrated by the MGH employees was exceptional, and the people at Commonwealth films were impressed by the quality of the acting and the professionalism of the staff. The employees of this hospital demonstrated incredible flexibility and graciousness."

Shooting locations included, White 5, Biomedical Engineering, the Outpatient Pharmacy, the Emergency Ward, Gray 5, Mrs. Munn's office, Admitting, the Bigelow 7 kitchen, the Bigelow 8 Intensive Care Unit, Human Resources, and the Jackson 7 corridor.

The Patient Care Assessment Educational Committee will show the film as part of the training sessions on incident reporting during Incident Reporting Week which began January 16. Schedules for training sessions will be posted throughout the hospital. Try to get a chance to view the new film—you might see some familiar faces.

No, this isn't what Harold DeMonaco does every morning before he comes to work. But a little makeup helped him look the part.



Security Officer John Maciaszczyk gets a touch-up before going on-camera.

Anniversary

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around like I used to." Mr. McCarthy traveled around the country enrolling students in music schools until he was stricken with debilitating arthritis.

"The advantage for me," he says, "is that I get my meals taken care of, and I have my own room. And I need to be around people. That is really the reason for it." Mr. McCarthy's medical condition has improved significantly. He now walks an hour a day year-round despite the New England cold.

"The host families are all people who, although they receive some money for this, really care for other people," says Ms. Morrison. "Maybe they have cared for elderly relatives, or their children have left home and they would like to do something useful with their time. Many of them have an interest in elderly people. Generally they are people who get satisfaction out of giving care to someone else."

However, Ms. Morrison notes that the number of available foster homes is shrinking. She feels that the Medicaid reimbursement to families is insufficient in economically demanding times although she is hopeful that the state will increase the stipend for foster families.

"This is a cost-effective program," says Ms. Morrison. "It costs much less than to place someone in a nursing home. It offers people a choice between living the rest of their lives in an institution and remaining in the community. It promotes independence in people. And the fact that people have remained in placement for years shows that this can be done successfully."

Ms. Morrison notes that the hospital's support of the program has been invaluable over the years. "Today we are seeing a tremendous increase in the elderly population," says Ms. Morrison. "The resources for these people are insufficient. Many families are still caring for their elderly and doing a good job of it. However, because of pressure to work, not as many people are staying at home who can care for the elderly when their care needs become greater. So there is a real need for a variety of programs for the elderly.This is one of them."

The Family Care Program has lived up to Eleanor Clark's vision. For ten years it has proved what its original architects believed—that though elderly people need more care with advancing age, many can remain independent, within their communities, and still have the support they need without utilizing expensive institutional placements.

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were often left holding the bill.

For instance, during his testimony Dr. Buchanan mentioned an elderly woman admitted because of broken ribs caused by a fall. But MGH physicians found her also suffering from arthritis, glaucoma, and heart disease. Medicare authorized reimbursement based on her rib injury. However, her other injuries necessitated additional care, as well as a support after discharge. A nursing home would have been best, but due to the shortage of nursing home beds, this was not an option. This woman stayed in the hospital for more than three months. Her care cost $40,731, yet Medicare only reimbursed the hospital $24,150. We ate the rest—a total shortfall $16,581 added to the hospital's deficit.

"If you can't discharge a patient, you can't admit another patient who needs care. And in a volume driven system we depend on being able to increase our admissions," says Mr. Crater.

Projections show that, under the current system, hospitals will continue to lose money on Medicare patients. What will happen if the federal government institutes further cuts? All patients will pay the price. And hospitals which treat

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What's Happening

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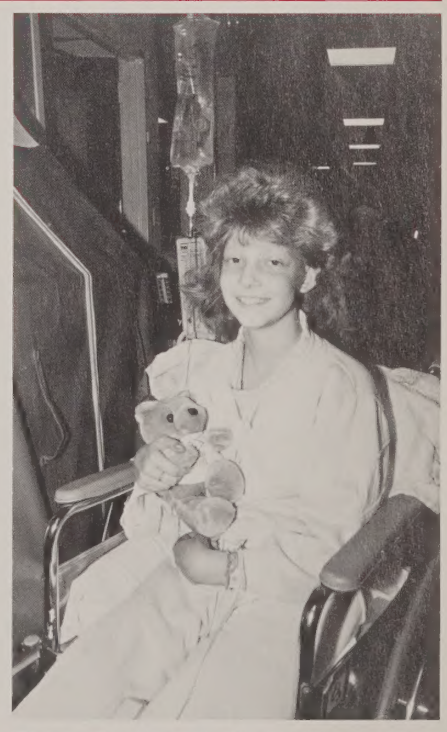
MGH hosts seminar for students

Radiology students from the Rhode Island Community College and North Shore Community College in Beverly attended a seminar at the MGH on radiography. The seminar was conducted by the Departments of Radiology and Human Resources. The Department of Dietetics provided lunch for the students. Dr. Peter Mueller, Head of GI Interventional Radiology at the MGH, and Dr. Shelly Field, MRI Educational Coordinator, conducted lectures, and the students were given a tour of the department.

Here Linda Goelet, RTR, (right) and Eric Ablorh (far left) explain how a kidney lithotripter works.



December marked a season of giving. Here Shannon Bishop, a patient on Burnham 5, holds a teddy bear given to her by elves from the Bank of Boston. Last month the Bank of Boston donated teddy bears to kids on the MGH Children's Service.

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those patients will pay a price.

According to the Healthcare Financial Management Association, more than 75 percent of the nation's hospitals anticipate a Medicare shortfall this year. But largely because Massachusetts hospitals face caps on non-Medicare as well as Medicare patients, the situation here is much worse.

And because of a region wide labor shortage, the cost of personnel is hitting Massachusetts hospitals especially hard. Medicare makes allowances for regional wage differences, yet the Medicare wage index has not reacted to Massachusetts labor costs. And the cost of labor in Massachusetts is climbing faster than anywhere else in the country.

The recently enacted universal health insurance law promised to relieve some of the financial burden of Massachusetts hospitals by appropriating funds to cover Medicare shortfalls and the state's share of the free care pool. However, in the face of a looming budget crunch, the state is not likely to keep its promise. At press time for the Hotline, Dukakis had not yet unveiled his plan to deal with a $600 million state deficit. However, Philip Johnston, Secretary of Human Services, reported to the Boston Globe that the $100 million to cover Medicare shortfalls promised hospitals for fiscal years 1988-89 is unlikely to appear. The MGH will lose $6.3 million on the state's failed promise to cover a portion of Medicare shortfalls. And the state will probably renege on its $77 million contribution to the free care pool causing the MGH an additional loss of $2 million for fiscal year 1989.

Dr. Buchanan's testimony before the House Select Committee on Aging was part of a larger effort spearheaded by the American Hospital Association (AHA) to raise awareness about these issues and persuade Congress to protect Medicare from further budget cuts.

"We need to make the new Congress and the new administration aware of the MGH's support of AHA efforts to protect Medicare," says Dr. Thomas S. Durant, Assistant General Director at the MGH.

MGH employees can use their voices to keep the nation's hospitals from even worse fiscal problems so that they can continue to serve their patients, including the elderly.The American Hospital Association has drawn up a resolution to protect Medicare. The resolution reads in part, "Be it resolved by the nation's hospitals, that Medicare payments to hospitals not be reduced below current law levels...to enable the Medicare program to meet the necessary costs of assuring the 33 million elderly and disabled beneficiaries continuing access to high quality health care services."

The AHA petition can be obtained from department heads. Your signature can make a difference.

What's happening

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MGH honored for helping civilians in service

The MGH was awarded a plaque for leadership in support of its employees who serve in the National Guard and Reserve. The award was bestowed by the State Chairman of the National Committee for Employer Support of the Guard and Reserve and is the second highest award given by this committee.

From left to right, Colonel John J. Prowse, and State Chairman Stanley Zucker present the plaque to David Catalano, Building Manager for MGH East, and Thomas Rothwell, Vice President of Human Resources.

Printed with permission from Flashcards, Inc.

Christopher Buckley, a Pulmonary Technologist, plays Santa Claus to a patient on Burnham 5. Employees on the Pulmonary Unit donated toys to young MGH patients who had to spend part of their holiday in the hospital.

General headlines

Among those members of the MGH featured in the news media during recent weeks are:

Dr. Willam F. Crowley, Jr. Chief of the Reproductive Endocrine Unit, interviewed by **Channel** 4 on the medical significance of RU486, the abortion pill developed in France.

Dr. Gerald Adler, of Psychiatry interviewed by **The New York Times** and the **Associated Press,** and **Dr. Eugene V. Beresin** interviewed by the **Associated Press** on narcissism.

Dr. Jerrold F. Rosenbaum of Psychiatry interviewed by **Channel** 7on phobias.

Dr. Alexander Leaf, Chief of the MGH-Harvard Cardiovascular Health Center, interviewed by **Health Magazine** on news media reaction to professional articles on fish oil as a possible prophylactic against coronary heart disease.

Dr. Oliver Cope interviewed by **The Boston Globe** and **The Boston Herald** for feature articles on his 60 years as an MGH employee.

Dr. Arthur J. Barsky interviewed by **ABC-TV** on hypochondria.

Mary Kay Fox of the Department of Dietetics interviewed by **Family Circle Magazine** on what men can eat without gaining weight.

Dr. Phyllis Silverman of the MGH Institute of Health Professions interviewed by **The Boston Globe** on bereavement.

Dr. Paul S. Russell, Chief of Transplantation, and **Dr. A. Benedict Cosimi,** Clinical Chief of Transplantation, interviewed by **The Boston Herald** on transplantation in Boston.

Dr. I. David Todres, Director of the Neonatal and Pediatric ICUS, and **Dr. Ruth B. Purtilo** of the MGH Institute of Health Professions appeared live on **Channel 7's Boston Common** to talk about the ethics conference recently hosted by the MGH and the Institute.

Retirements

Congratulations to the following MGHers who have recently retired.

October, 1988

Virginia Gilligan, Professional Billing Office, 24 years
Lily Wechsler, Thyroid Laboratory, 21 years
Rosa Jenkins, Dietetics, 18 years

November, 1988

Frances Davis, Dietetics, 24 years
Cyla Silber, Orthopedic Research, 23 years
Inez Watkins, Nursing, 23 years
Almaida Hutchinson, Clinical Administration, 20 years
Ethel Anderson, Operating Rooms, 19 years

December, 1988

Frances Fisher, Communications, 27 years
Eleanor Murphy, Nursing, 27 years
Joseph Blake, Dietetics, 21 years
Thelma Carthy, Environmental Service, 11 years
Crescenzo Deangelis, Dietetics, 10 years

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MGH HOTLINE UPDATE

Friday's emergency got swift response

An electrical fire occurred in the basement of the Warren Building Friday morning. The Boston Fire Department received the first call at 8:33 a.m. and responded within two minutes. The Police Department also responded quickly. There were no injuries and no threat to patients.

Though the fire never spread beyond the basement, smoke reached several floors and 44 patients had to be moved to other parts of the hospital. Six patients on Phillips 2 were relocated. And 38 patients on Warren/Baker 12 were moved because smoke evidently reached that floor through the elevator shaft. By Friday afternoon, all patients had returned to their rooms except for coronary care patients on Phillips 2 and in the west wing of Warren/Baker 12. These patients were relocated to other hospital beds.

Eighteen fire companies and nine chief officers were on the scene. Fire Department personnel used a dry chemical to put out the fire. The chemical blankets the fire and excludes oxygen. Water cannot be used to extinguish an electrical fire because of the danger of electrical shock.

Smoke ejectors, devices that act like vacuum cleaners, were used to clear the heavy smoke from the buildings. The fire had been completely extinguished and the smoke removed by 11:40 a.m.. However, Fire Department crews remained to ensure there was no further danger.

Both the Phillips House and Warren Building lost power. Since there was no power in the Phillips House, elevators, and other equipment that required electricity did not work. Emergency power was available in the Warren building, but MGH staff members had to use flashlights in the Phillips House. But by 8:30 p.m. normal power was reestablished in the Phillips House.

The Wellman and Bartlett buildings lost power as well, though there was no fire or smoke in these buildings. Power there was also back by Friday night leaving only the Warren Building blacked out.

MGH staff members responded swiftly and efficiently to the emergency. Disaster headquarters was set up in the Trustees Room where Dr. Buchanan met with Dr. John F. Burke, Chair of the Disaster Committee, and other hospital administrators to coordinate the hospital's response to the incident. They considered evacuating patients to other MGH buildings not affected by smoke and also the possibility of moving patients to other hospitals including the Shriners Burns Institute and the Spaulding Rehabilitation Hospital but decided that this was unnecessary. The New England Baptist, the MEEI, and Brighams and Women also offered to take patients if necessary.

All departments were involved in ensuring the safety and comfort of MGH patients and in helping the hospital return to normal functioning as quickly as possible.

Several people in elevators in the Phillips House, Bartlett, and Warren buildings were quickly assisted out by Buildings and Grounds.

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MGH employees came through in a pinch

Calmness under fire. That's the briefest way to describe what happened Friday morning after an electrical fire broke out in the basement beneath the Warren Lobby.

Smoke billowed up through the elevator shaft and ducts to the cardiac patient area of Warren/Baker 12 and to the Coronary Care Unit on Phillips House 2. Nurses and Clinical Administration reassured patients by their composure and their words.

So it was not surprising that patients being wheeled from those areas acted as though they were going to Radiology for tests. Some joked as they were trundled from their rooms.

But it was not just the nurses, not just the floor personnel who responded. Far from it. There were Department of Dietetics employees who with Clinical Administration lugged food up the stairs of the Phillips House because the elevators were disabled. The patients missed not a meal.

There were Buildings and Grounds and

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Emergency

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The Warren Building electrical power was to be restored Saturday.

There was smoke damage to Warren/Baker 12 and various other areas including the basement kitchens. Losses from food spoilage were heavy.

By restoring power to Wellman Friday night , the Electric Shop apparently prevented losses both of animals and to refrigerated specimens.

Research community with lab space in both the Warren and Wellman buildings worked diligently to preserve frozen specimens and experiments requiring electrical support.

Language was no boundary

At the height of the action Friday, a relative who came to visit a patient couldn't understand why it was not possible. She spoke only Turkish and in her confusion became agitated while at the emergency center set up by Social Service in the Wang ACC lobby.

With the aid of Margarita Battle, Director of Interpreter Services, Social Service soon had an MGH employee in the Charlestown Navy Yard explain the problem in Turkish via telephone. The visitor's anxiety turned to a smile.

Employees

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Electric Shop workers who were down in the basement area before the firemen had a chance to arrive. The Boston Fire Department did a tremendous job of clearing the smoke from the fire they confined to a small segment of basement.

Security was everywhere cordoning off the affected areas and helping in a dozen ways. Environmental Services responded immediately. Dispatch was on hand to assist in the transport of patients.

Social Service set up an emergency area for patients' families to gather for information in the Wang Ambulatory Care Center. They maintained contact between patient floors and relatives waiting to drive home those scheduled for discharge and even at the height of things managed to discharge a Greek-speaking patient quickly enough to make his flight to Athens.

Communications kept the emergency calls flowing while somehow handling the constant pressure of "routine" calls. In fact it would be impossible to list every department, let alone individuals who rose to the occasion.

"The performance of this entire hospital was magnificent," said Dr. J. Robert Buchanan, General Director. "Employees work hard every day. Yet somehow in an emergency they manage to shift into overdrive and make it look easy. I was never more proud of this hospital than I was today."

MGH HOTLINE

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New vet sets high standards for lab animal program

The MGH has a new veterinarian. William T. Watson, D.V.M., M.S., retired U.S. Public Health Service Captain, has come on board as the Director of the Office of Laboratory Animal Resources. As the hospital's veterinarian, Dr. Watson will coordinate the care, use, and purchase of laboratory animals and consult with researchers on the selection of animal models for the study of human diseases.

Dr. Watson has had extensive experience in laboratory animal medicine. He served in the U.S. Army, Veterinary Corps, and also as a commissioned officer of the United States Public Health Service. Before coming to the MGH, Dr. Watson was Chief of the Small Animal Section of the Veterinary Resources Branch of the National Institutes of Health. While in the army, he served in the Veterinary Corps in Thailand and as Commander of the Military Dog Hospital in Saigon. He was awarded the Bronze Star for service in Vietnam.

Dr. Watson received his Doctorate of Veterinary Medicine from Tuskegee University in Alabama and a Master's degree in Laboratory Animal Medicine from Ohio State University. He is certified by the American College of Laboratory Animal Medicine.

Animals used in research at the MGH are purchased from commercial breeders who are licensed by the U.S. Department of Agriculture (USDA). Laboratory animals are bred for specific characteristics or for a genetic predisposition to a certain disease. Research animals at the MGH are segregated by species and cared for by a facility manager, a part-time clinical veterinarian, and several animal care technicians.

Animals are invaluable in helping researchers learn about diseases in humans. For instance, the watanabe rabbit has helped researchers understand a condition marked by unusually high

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Dr. William T. Watson took a moment from examining one of the receiving areas for laboratory animals. Here incoming animals are placed in sterilized cages, with clean bedding, food, and water. There are five major animal housing facilities at the MGH.

The winning ways of an MGH achiever

"I always like to be a winner, and I never settle for second best," said Gloria Pierre, an employee in the Admitting Department at the MGH. Ms. Pierre's quest for excellence has been rewarded with selection as the Massachusetts General Hospital's Black Achiever.

Each year the YMCA honors outstanding Black professionals from companies throughout Boston. Accompanied by friends, colleagues from the MGH, and her son, Ms. Pierre accepted her award at a banquet last month that honored 111 Bostonians as Black Achievers. As a Black Achiever, Ms. Pierre will do 40 hours of volunteer work for a YMCA program that matches inner-city youth with professionals.

Ms. Pierre is no stranger to working with children. She has worked hard to instill values of hard work, honesty, and compassion in her 16-year-old son Nigel.

"I would like to give back some of my knowledge and experience to children," said Ms. Pierre. "I would like to be a mentor and a role model, like I am for my son."

Ms. Pierre said she owes much of her motivation and drive to a teacher who acted as a role model and mentor for her when she was a child in Trinidad. "She had this driving force," said Ms. Pierre. "She always made you believe that you could be better and that you could do better."

Ms. Pierre, an MGH employee for 18 years, works as a Senior Registration Representative in the Admitting Department. She obtains insurance information on patients admitted to the hospital, especially those admitted through the Emergency Department. Nearly half of the patients admitted to the MGH come in through the Emergency Department. Often the hospital has no financial information on these patients, and the patients themselves don't understand their insurance coverage.

Gloria Pierre, the MGH Black Achiever, is proof that efficiency and compassion are a winning combination.

Ms. Pierre researches each case by talking with family members, employers, insurance companies, and sometimes lawyers, to find out what type of coverage the patient has and to make sure the hospital is reimbursed.

"Many people don't know what to do when they come into the hospital. I have to educate the patients and their relatives about what they must do. Many of them have insurance, but you have to dig deep, deep under the rug to get the information," said Ms. Pierre.

Many insurance companies require immediate notification of a patient's hospitalization or they will reduce the benefit. "Many patients don't know that," said Ms. Pierre. "This is why it's very important to start researching as soon as they come in the door. And this is where I come in."

Ms. Pierre is meticulous in her investigations. She is like a private investigator who tenaciously follows every lead until she finds the information she needs. "Sometimes I start with a blank sheet of paper. But from nothing I make something and make sure the hospital gets paid," said Ms. Pierre.

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cholesterol levels.

"This is a rabbit that inherits the trait to develop high cholesterol and high triglyceride values, mimicking familial hypercholesterolemia in man," said Dr. Watson. Familial hypercholesterolemia is an inherited predisposition to very high cholesterol levels, sometimes as high as 300-500 mg/dl (milligrams per deciliter). A cholesterol level below 200 is considered healthy. In rare cases, children who suffer from hypercholesterolemia can have cholesterol levels up to 1000 mg/dl and may suffer a heart attack before they reach three years of age.

"Watanabe rabbits naturally have cholesterol levels that are above 300, and they have triglyceride values anywhere from 500-1100, which is extreme," said Dr. Watson. "They develop arteriosclerosis in the cardiac vessels [their heart arteries are narrowed by cholesterol and triglycerides], the abdominal aorta vessels, and in the brain." These rabbits are fast becoming important models for studying conditions related to arteriosclerosis. They are used to test drugs that decrease cholesterol in the blood and to test instruments like lasers that remove plaque from vessels.

"The problem with studying these diseases in man is two-fold. There are ethical and moral issues to consider, and our life-span makes certain types of studies difficult," said Dr. Watson. "If I started studying a disease process that took a lifetime, obviously I wouldn't be able to complete it because I would not be around to see the second, third, and fourth generations. But with mice that have a gestation [pregnancy] period of three weeks and can be rebred at six weeks of age, you can study generations during your lifetime."

Dr. Watson has a special interest in identifying and developing animal strains that have diseases like those in humans. "If we can find animals that have diseases similar to those in man," said Dr. Watson, "we can use those animals to study the disease process. I think that this is where animals serve their greatest contribution to man. We would still see human life expectancy at 40 or 50 years if it were not for animal research."

Dr. Watson said that animal research ultimately benefits the animals as well. "If we learn how to treat the condition in laboratory animals," he said, "we can and do transfer that knowledge to treating animals that are not research subjects." Veterinarians, for example, treat dogs with certain types of heart disease with drugs developed for humans but tested in dogs.

Animal rights organizations that

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Black Achiever

from page 1

"Gloria is conscientious, thorough, and she is enormously supportive of the Admitting Department," said Martha Byington, Director of Admitting. "The high expectations she sets for herself set a standard for the rest of us to follow."

Ms. Pierre came to the United States from Trinidad 18 years ago. After one week in the country she landed her first job—in the Medical Records Department at the MGH.

"Since I can remember, I have always wanted to be a nurse," said Ms. Pierre. "But when that dream didn't come true, I figured the closest thing was to work in a hospital. This is why I came here. That was 18 years ago and I'm still here, because I like the MGH. It's really a great place, and I feel proud to work here."

After working in Medical Records for six years she moved into the admitting office and subsequently worked in the Pre-Admission Unit.

Ms. Pierre is proud of her accomplishments. "When we moved up to Admitting, nobody knew how to work the computers. We were the only ones trained and we had to pass that knowledge on," says Ms. Pierre. "I have been involved in every aspect of this department. I can answer any question, if someone calls, I know what to do, or if a patient comes in, I can help them."

Ms. Pierre has recently become a U.S. citizen.

"It took me a while to make up my mind about becoming a citizen because giving up your country is a big thing," she said.

Since her days in Trinidad, when she was a member of a winning net ball team (net ball is similar to basketball), Ms. Pierre has always aspired to excellence. "For my teacher in Trinidad, the sky was the limit. She always motivated us to win."

This is what Ms. Pierre hopes to accomplish in working with youth through the YMCA. "I want to help kids build their self esteem. It is so important for them to achieve something—to learn to climb the ladder step by step."

In General

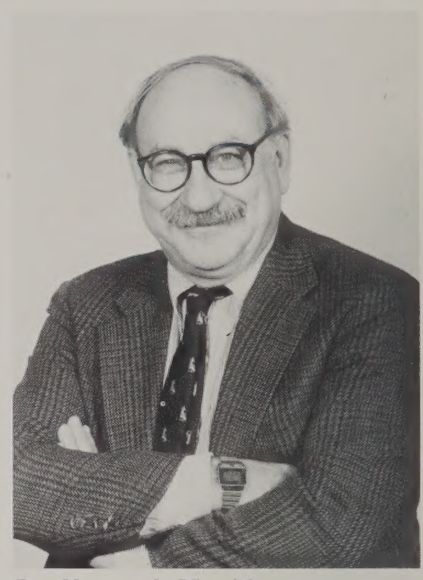
Dr. Henry J. Mankin, Chief of Orthopaedics at the MGH, and Edith M. Ashley Professor of Orthopaedic Surgery at Harvard Medical School, has been inducted into the Royal College of Surgeons as an Honarary Fellow.

He joins a select group of only 35 Americans to be so honored of which three others are orthopedists. Dr. W. Gerald Austen, Chief of the Surgical Services, was inducted into the Royal College of Surgeons in 1986. Membership in the College is the highest honor bestowed upon surgeons in Great Britain.

Dr. Mankin joined the Massachusetts General Hospital as Chief-of-Service in 1972. An eminent educator, surgeon, and researcher, Dr. Mankin is well known for pioneering the use of cadaver bone to replace cancerous limbs. Dr. Mankin has received numerous accolades throughout his professional career, from international recognition for research on cartilage, metabolic bone disease, and rheumatic disorders, to recognition as an innovator in postgraduate education in orthopedics.

Dr. Mankin is warmly regarded by his colleagues and friends at the MGH for his humor and commitment.

The second annual Farahe Maloof Lecture was held in the Ether Dome to honor **Dr. Farahe Maloof.** Dr. Maloof served as Chief of the MGH Thyroid Unit from 1966 to 1980 and is Professor of Medicine Emeritus at Harvard Medical School. The lecture was delivered by **Dr. Bruce Weintraub,** Chief of Molecular, Cellular and Nutritional Endocrinology at the National Institute of Diabetes, Digestive and Kidney Disease. Dr. Weintraub was previously a member of the Thyroid Unit at the MGH. Funds for the lecture were generously provided by patients, colleagues, and friends of Dr. Maloof. Contributions for the Farahe Maloof lecture series can be sent to the Farahe Maloof Lectureship, care of the MGH Thyroid Unit.



Dr. Henry J. Mankin

Renie Rutchick, Assistant Director of the Department of Social Services, was elected Vice Chair of the information systems committee of the Society for Hospital Social Work Directors. This committee will play an important role in developing a national database describing and defining social work in hospital settings.

Members of the Speech Language Pathology Department at the MGH recently attended the annual national convention of the American Speech Language Hearing Association (ASHA). MGH speech-language pathologists who presented at the convention included: **JoEllen Cumpata,** who chaired a mini-seminar on *"The Acquisition of Multi-mnorphemic Predicates in American Sign Language,"* and **Ellen Donahue** who presented a paper entitled *"A Behavioral Health Profile of Voice Disordered Patients,"* coauthored by Ms. Cumpata and Dennis Norman, PhD in Child Psychiatry. **Julie Atwood Wheelden** chaired a short course entitled "Selling Your Services: Public Information and Marketing Tools" and participated in the Educational Standards Board mini-seminar for program Directors and Site Visitors.

The convention covered state-of-

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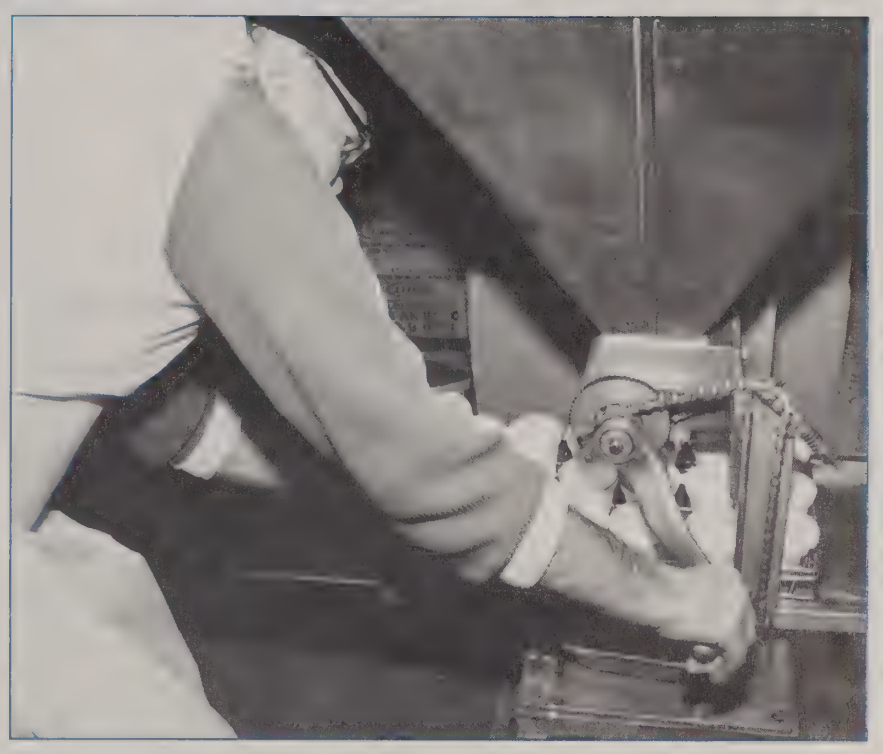
From left to right, Dr. Farahe Maloof, Emily Maloof, Drs. John T. Potts, Larry Jameson, Gilbert H. Daniels, and Bruce D. Weintraub.

The Ice Cream Man

It is never too cold for soft serve. Here Billy Prentice goes about his daily business of making ice cream for patients. Mr. Prentice is an expert at creating this creamy dessert. He's been making the MGH variety for 42 year.



Vet

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oppose the use of animals for research often present misleading information or fail to understand how animals are used in hospital and university research environments. For instance, an organization recently distributed literature at the MGH opposing the use of animals for research on household products. The MGH only uses animals for life-saving research on human disease.

Researchers must submit their protocols to the MGH subcommittee on Animal Care for approval before the research can begin. The committee evaluates the research project to insure that the study is warranted and considers the comfort and welfare of the animals. And MGH researchers use anesthesia if a procedure might cause an animal discomfort.

The USDA has set standards under the Animal Welfare Act that govern how research animals are to be purchased, handled, cared for, and used. The U.S. Public Health Service also has policies that must be followed when using research animals. Dr. Watson is well aware of these standards and in fact is helping shape them. As a consultant to the USDA, Dr. Watson has worked with other federal officials to integrate the Public Health Service (PHS) policies into the new law. The original animal welfare

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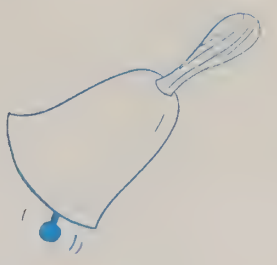
What's happening

Got the February blahs? A class may be the cure.

During February, Training and Development is offering a variety of classes to help you succeed in your present and future positions. On February 9, from 9:00 a.m.-noon, department heads, managers, head nurses, and supervisors are invited to attend a workshop on **the hows and whys of the MGH performance appraisal system.**



A two-session workshop which will develop your skills as a communicator and explore the partnership between you and your boss will be held on February 7 and 13. It is called **Management Tools for the Professional Secretary.**

On February 9, 15, and 24, you can explore ways to handle your your job more efficiently by attending **"My Office, Your Office, Our Office."**

Want to learn **how to prepare a presentation?** On February 7 and March 2 you can learn how to organize you information, create visuals, and layout the presentation for maximum impact.

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Photo Contest

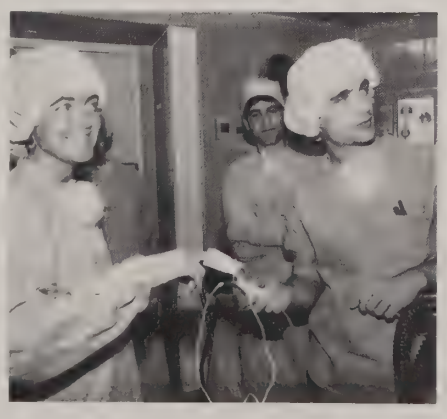
Do you have a favorite photograph, one you took at just the right angle, with perfect lighting, and that exemplifies the meaning of the word **caring** to you? If you do, pull it out and dust it off, the Editorial Staff of the Department of Nursing's Newsletter, **Caring** wants to see your best work. The **Caring** Team wants to know how you picture the essence of caring. It's up to you to determine what caring means to you and how this can be captured on film.

First, second and third place cash prizes will be awarded. Judges will include members of the Caring Editorial and Photography staff.

Guidelines:

1) Photographs submitted to the competition cannot be returned. By submitting your work you are granting permission to the **Caring** Newsletter and/or the Massachusetts General Hospital to use the photograph in its publications and authorize Massachusetts General Hospital to reproduce, sell, copyright, exhibit, and distribute it in any way Massachusetts General Hospital deems appropriate. The photographer will receive proper credit for any piece that is reproduced.

This is one of my favorite photographs. Do you have a special photo that highlights the meaning of caring? Richard DeCesare, of Anesthesia Clinical Engineering, takes Kelly Noonan's pulse as she looks on in disbelief. (Story: Mentors teach youth about health care careers, August 1988 Hotline.)



2) Photographer must be an employee of the MGH. Note: Individuals whose names appear on the Winter 1988 **Caring Newsletter** masthead are excluded from entering this contest.

3) All entries must have a copy of the contest entry form taped to the back of the photograph, along with consent forms for all individuals included in the photograph.

4) Photographs may be submitted in black and white or color. Entries submitted must be at least 8" X 10". No slides will be accepted.

Submit EntryTo:

Caring Photography Contest,
Department of Nursing
c/o Nursing Data Center, White 1

Deadline for submissions is February 15, 1989. Selected entries will be published in the March, 1989 issue of Caring and will be displayed during the Nurse Celebration Festivities, in May, 1989.

Note: Entries mailed to the above address must be properly packaged (i.e. with cardboard, etc.) to insure against damage in transit. Entries may also be hand delivered to the above address. Questions regarding this contest may be addressed to Marcia Lambert, Caring Graphic Design Coordinator, ext. 5255.

The MGH HOTLINE is published twice monthly by the MGH News Office.

William E. Walch, *Vice President for Resource Development and Public Affairs*

Martin S. Bander, *Director of News and Public Affairs*

Kennetha J. Bigham, *Editor*

Doris G. Schreckengaust, *Copy Editor*

Photos processed by MGH Photo Lab

What's happening

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So come in out of the cold. Do something nice for yourself and take a course! Contact Training and Development for further information at ext. 2230. Look for their red calendar throughout the campus.

Here a graduate of a management training course, offered by Training and Development, receives a certificate of completion from Thomas P. Rothwell, Vice President of Human Resources. The course, "Frontline Leadership" is geared toward managers, head nurses, unit nurse leaders, and supervisors.

New vendor to supply MGH labs

The MGH has a new vendor, VWR Scientific, for all laboratory supplies. Last month Materials Management and Purchasing held a ribbon cutting ceremony for the new MGH-VWR stockroom in the MGH Somerville Warehouse. The purpose of the stockroom is to provide products most frequently used by researchers and by people in the clinical labs. In addition, laboratory supplies which are usually ordered from Pharmacy Lab Supply or Supply Services will now be stocked in the MGH-VWR stockroom. Items such as coffee cups, gloves, etc. will be available from Supply Services as usual. Because of fire code regulations, chemicals cannot be stored in the Somerville warehouse but can be ordered from the VWR purchasing coordinator. For more information contact Mary Riffe, Manager of Inventory and Supply at ext. 8227.

In general

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the-art developments and research findings in the field of communication disorders. ASHA is the professional scientific, and accrediting organization representing 56,000 speech-language pathologists and audiologists who are specifically educated to treat the 24 million people in the U.S. affected by communication problems.

General headlines

Among those members of the MGH featured in the news media recently are:

Dr. Jeremy N. Ruskin of Cardiology interviewed by **Channel 4** on the use of automatic defibrillators.

Dr. W. Gerald Austen, Chief of General Surgical Services, interviewed on behalf of the American College of Surgeons by **CBS-TV** on proposed national changes in the way physicians are reimbursed.

Dr. Richard F. Selden of Molecular Biology; **Dr. Roman W. DeSanctis,** Clinical Chief of Cardiology, and **Dr. David M. Nathan** of the Diabetes Unit interviewed by **Bavarian TV Network** in Munich, Germany, for a program on Dr. Selden's genetic research.

Dr. Howard P. Baden of Dermatology interviewed by the **Wellesley Townsman** on the use of the newly popular pharmaceutical Retin A.

Dr. Alasdair K. Conn, Director of the Emergency Services, **Christina M. Graf, R.N.,** and **Mary Connaughton, R.N.,** of Nursing interviewed by **Town and Country** for a profile on the MGH.

Dr. Verne S. Caviness of Neurology appeared live on **Channel 7's Boston Common** to talk about the new MGH Neuroscience Center.

Drs. Joseph B. Martin, Chief of Neurology, and **James F. Gusella,** Chief of Neurogenetics, interviewed by **The Boston Globe** for a **Globe Sci-Tech** article on the newly opened MGH Neuroscience Center of which Dr. Martin is Director and Dr. Gusella, Coprincipal Director.

John Snowden, head of the Orthopaedic Brace Shop, videotaped by a Tampa Bay, Florida, television channel while fitting a brace on a burn patient who resides in Florida.

Dr. John M. Bruner of Anesthesiology interviewed by **The Pittsburgh Press** on his opinion of a new way of measuring heart stroke volume.

Dr. Jesse B. Jupiter of Orthopaedics interviewed by **The Boston Globe** on an update article on recuperation from operations such as the recent one undergone by the Boston Celtics' Larry Bird.

Dr. Howard P. Baden of Dermatology interviewed by **Channel 7** on the drug Rogaine as a treatment for baldness.

MGH neurosurgeon **Dr. H. Thomas Ballantine** interviewed by **The American Association of Neurological Surgeons** for a history of American neurosurgery.

Dr. Robert T. Schooley of Infectious Disease was interviewed for a half-hour program on radio stations **WMEX** and **WMJX** on his research on CD4 for treating AIDS.

Cindy Howard, M.S., R.D., interviewed by **The Boston Globe** on a study she has carried out on the eating habits of gymnasts.

Channel 2's Body Watch program interviewed **Dr. Isaac Schiff,** Chief of Gynecology, for a series concerning infertility.

Pictured below, **The United Press International, Channel 4,** and the **Boston Herald** covered a news opportunity with **Dr. Anthony S. Fauci,** Director of the National Institute of Allergy and Infectious Disease who lunched with the MGH Infectious Disease Unit prior to meeting with AIDS activists elsewhere in Boston.

Vet

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law, passed in 1966, outlines standards for the treatment of laboratory animals. In 1985 a series of amendments broadened the scope of the law. Dr. Watson was appointed by the Secretary of Health and Human Services to work with USDA staff to insure that the law was consistent with PHS policies.

He has also worked as a consultant to the American Association for Accreditation of Laboratory Animal Care (AAALAC), an organization that grants accreditation to facilities that use laboratory animals for research purposes. As a consultant for AAALAC, he evaluated the animal care facilities and practices of institutions around the country.

Dr. Watson grew up in Georgia and always had dogs and cats as pets. "Caring for my own animals is what steered me toward veterinary medicine. Laboratory animal medicine is a very worthwhile and rewarding profession. You can assure that the animals that are being used for research do not suffer, that they are healthy and treated humanely, and that they are used for the right purposes. That is basically what laboratory animal medicine is all about."

Dr. Watson has the honor of being the first fulltime veterinarian at the MGH. "I am looking forward to a wonderful association with the MGH. This hospital has an excellent reputation in patient care and research, and we intend for the animal care program to meet those same standards."

Saying Thanks

Former patients and their family members often write letters in appreciation of the care they received while at the MGH. Here is one such letter.

To the Pediatric Intensive Care Unit

On November 14, 1973, our son Andrew was born at Mount Auburn Hospital in Cambridge, Mass. There were complications (respiratory distress) and at the advice of doctors, he was transferred to the newborn intensive care unit at Massachusetts General Hospital. Because of what the facility and staff was able to provide him with, he beat the 50/50 chances of survival at the outset, a lung collapse, the possibility of brain damage, and hearing loss. He rapidly began to stabilize and grow healthier...and he hasn't stopped since! (5′11″ and size 12 1/2 shoes).

As I reflect on this upcoming birthday, I want to thank Massachusetts General Hospital for providing the environment that secured his chances, not only to survive, but to thrive as a young man. As his parents, we've been fortunate to be a part of this process, as with all our children.

To everyone who makes Mass. General the place it is today (and was then) it feels great to be able to say thank you again...you made a difference!!!

Sincerely,

Gerald M. Connell

21 February 1989

A publication of the
News and Public Affairs Office
of Massachusetts General Hospital
Bulfinch 1 / Extension 2206

MGH HOTLINE UPDATE

Fiscal crisis means change at the MGH

The governor's failed promises and federal cuts in Medicare have hurt the state's hospitals, already in crisis. And at the MGH, as at other hospitals around the state, administrators have to make painful choices to help the hospital survive.

Because of the governor's action, the Massachusetts General Hospital has a $7.3 million addition to its originally planned $5.8 million budget deficit. This brings the expected deficit to $13.1 million.

Though we didn't create the problem, we have to respond to the environment that did. We have to reduce our deficit to the level approved by the Board of Trustees. And since we only have half of this fiscal year to save the $7.3 million, we have to cut our annual budget by nearly $15 million.

We have the Herculean task of getting blood from a stone; the task of reducing our total budget by approximately four percent or our labor budget by more than six percent. Administrators at the MGH are searching for ways to do this that will least impact direct care providers. And department heads are talking with their employees and soliciting ideas on how to address the problem.

There may be layoffs. But in reality, we don't yet know what form the budget cuts will take. Administrators are working as quickly as possible to devise a plan. Dr. J. Robert Buchanan, MGH General Director, plans a town meeting to inform employees of the changes, and a more detailed Hotline article will cover the hospital's financial status and response to the current crisis.

So why are we here, facing a fiscal crisis that will affect us all on a very personal level? While the cost of treating patients continues to increase, reimbursement from third party payers shrinks. We have increased admissions. We have taken steps to streamline our departments. And as you know by the sweat of your brow, health care workers work hard to insure quality patient care.

And last year, we went even farther.

We spent time and energy trying to help the governor get passage of the universal health care law—a law that not only promised to provide health insurance for all Massachusetts residents by 1992 but also promised to help hospitals struggling with a growing fiscal crisis so that they would be around in four years to treat those newly insured patients.

But broken promises are what we have gotten—to the tune of $464 million. The governor appropriated $37 million to cover Medicare shortfalls for fiscal year 1988. But the governor now says the state will not pay. The governor promised an additional $100 million to cover Medicare shortfalls for fiscal years 1989-1990. About face! The governor says no to that promise too.

> ***"We feel betrayed. Twenty to thirty hospitals in the state were near their financial limits before these cuts. We are being driven into the ground by massive deficits."***
>
> --Stephen J. Hegarty
> President of the MHA

The federal government matches the state's contribution to Medicaid, the health insurance program for the poor. The state then uses those funds to pay care-givers who deliver services to the poor. But lately the state hasn't paid its bills.

In fact, the Commonwealth of Massachusetts owes hospitals $150 million in unpaid Medicaid bills and another $100 million in claims that it has been slow to process. Governor Dukakis says the state won't pay what is currently owed, and he plans to request $45 million

continued on back

Important Notice

On February 27, **N. Grove St.** will be made **ONE WAY IN** from Cambridge St. to the White Building. Garage entrances and exits will remain as they are now. When exiting from the Fruit St. garage, the right turn onto N. Grove St. will not be permitted. Fruit, Parkman, Blossom, and North Anderson Streets will remain ONE WAY. When leaving the White Building entrance, a right turn onto Fruit St. or a left turn onto Parkman St. will be required.

in additional cuts in allocations to hospitals in the 1990 Medicaid budget.

The universal health insurance law promised to relieve hospitals of the burden of absorbing the cost of caring for patients who cannot pay by contributing to the uncompensated care pool. The state estimates its liability for uncompensated care at $77 million. The MGH alone provided $28.3 million in uncompensated care last year. But again, Governor Dukakis says the state won't pay.

Hospitals have been left holding a $464 million bill, and unfortunately, it is a bill that we can't afford. "The bill {Chapter 23} would never have passed if it were not for the intense lobbying efforts of the hospital community," said Stephen J. Hegarty, president of the Massachusetts Hospital Association, at a recent meeting of hospital executives. "We feel betrayed. Twenty to thirty hospitals in the state were near their financial limits before these cuts. We are being driven into the ground by massive deficits."

Thirty-five percent of the MGH's patient care revenue comes from Medicare, the federal program that provides health insurance for the nation's elderly. Yet, the Reagan administration has cut $30 billion from the Medicare budget since 1981, and President Bush plans further cuts. The Massachusetts Hospital Association estimates that Massachusetts hospitals will lose $150 million on Medicare.

Health care in this country is expensive for a variety of reasons. There are the additional costs of treating the growing elderly population; the additional costs of treating patients with AIDS; the costs of new life-saving technologies and improved treatment methods; and the costs of hiring and retaining staff, especially those in fields of short supply. And teaching hospitals in major urban areas must absorb the costs of providing medical education and of treating sicker patients who require more resources.

But some critics say that Massachusetts hospitals are more expensive or less efficient than their counterparts around the country. This simply is not true. Massachusetts hospitals have had the second lowest rate of cost increase in the nation over the past five years. Since 1981, hospital revenues per admission have grown 40% faster nationally than they have in Massachusetts. Yet wages for workers in all industries increased 20% faster here than they did around the country.

In 1988, two out of three Massachusetts hospitals lost money from patient care operations. How are we to survive? By making hard choices, by being creative, and by continuing to strive for excellence. And we are doing all of these things.

We have responded to the volume-driven nature of health care reimbursement by increasing admissions, providing more cost effective technologies like kidney-stone lithotripsy (a non-invasive procedure to crush kidney stones that greatly decreases the number of days a patient must stay in the hospital), and by finding innovative ways to give outpatients greater access to our services.

Writes Dr. Buchanan, "It is ironic that in an era when we can do so much for our patients, the practice of medicine is, if anything, even more frustrating. We too must prevail and innovate, not only in treatment and research, but also in how we organize, deliver, and finance the care that we provide."

In the last month, we have opened an additional 26 beds, a move that will allow us to treat more patients. We have found ways to use beds more efficiently by coordinating scheduling of patients for the Cardiac Catheterization Laboratory with their hospital admissions. Now patients who need this diagnostic procedure can have it upon admission and not use a hospital bed as a waiting area.

Radiology has made a commitment to provide next day service on all inpatient imaging studies except MRI—a move that will improve patient care while shortening hospital stays. The Professional Services Corporation has opened an Access Office which will provide physician referral for the public. And soon to open at the Charlestown Navy Yard is a new Magnetic Imaging Center that will greatly enhance our ability to provide this diagnostic service to even more patients.

In addition to efforts to streamline our operations, MGH administrators are active on the legislative level as well. For instance, they are working with the Massachusetts Hospital Association on a major campaign to raise public awareness about the fiscal crisis in the hospital industry.

The future of our health care system is uncertain. But here at the MGH we will weather the storm by continuing to do what we do best—caring for patients. And we will meet our fiscal challenge with the same commitment, creativity, and excellence that we apply to patient care.

MGH HOTLINE

16 March 1989

A publication of the
News and Public Affairs Office
of Massachusetts General Hospital
Bartlett 9, Extension 2206

Deficit forces layoffs

Early this month the MGH began a painful process, something it has only had to do three times in its modern history—the process of cutting personnel to reduce a burgeoning deficit.

On March 2, employees were informed that the equivalent of 241 full-time positions would be eliminated. Many were already vacant. However, the cuts still meant layoffs for 118 MGH employees, 1.4 percent of the approximately 8,300-person workforce.

Because of federal cutbacks in Medicare and the state's failed promise to help hospitals out of a fiscal crisis, the MGH was faced with an unanticipated $7.3 million addition to its deficit. To make up for that loss in the remaining six months of the fiscal year required cutting $15 million from the annual budget.

When MGH administrators first tried to address this crisis, it appeared that 6.4 percent of the personnel budget would have to be cut. But through creative measures, including creating an MGH temporary help pool to decrease our dependence on more expensive outside services, the hospital only had to reduce its personnel budget by 3.1 percent.

"Even though we concentrated on making our reductions through non-layoffs, people reductions were by far the most painful," said Dr. J. Robert Buchanan, MGH General Director. "However, it is our hope that many of the approximately 118 persons will be placed in unfilled positions that are essential."

"We have to do this to survive as an institution," said Stephen H. Kauffman, Assistant General Director. "But what I see when I look at those numbers is faces—people and their contributions. I see what they have done for this institution to make it what it is. It is difficult for those people involved, and it is also difficult for those who remain to carry on. It's not fair, but it has to be done. And it's going to require us working together."

Employees who were laid off were assisted with making the transition through a support service provided by Human Resources and the Department of Social Services. And those employees may be recalled if

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Support Center eases transition for employees

Ten days before layoffs were announced, Human Resources personnel were working into the evening hours trying to shape a support service for employees affected by reductions.

"Many of us had been through a similar transition in another organization," said Kathy Rice, Assistant Director of Human Resources. "We thought about what things were done right and what things were done wrong and what we would have wanted had we been the person laid off."

What evolved from the sharing of experience was a center that provided information, empathy, and support.

"The purpose of the center was to let both the individual and the supervisor know that people did care and that we were here for support and to help them work out the options," said Ms. Rice.

"It was a safe environment," said Betty Lang, Employment Manager. "It was an OK place to be emotional. Sometimes people couldn't express their feelings in their departments but would come in here and let down."

After people were informed that they had been laid

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Betty Lang, Employment Manager, and Debbie Bernardi, Human Resources Assistant, review a binder of resumes. At press time for the Hotline, 48 of the 118 laid-off employees had been placed in other positions within the hospital.

Dr. Buchanan addresses tough questions at Town Meeting

Tense expectation hung heavy in the air over the WACC cafeteria and lobby at the first Town Meeting held two days after layoffs had begun. MGH employees gathered at tables and stood in groups, speaking in murmurs, speculating what Dr. Buchanan would say.

They hadn't long to wait. The General Director of the MGH opened the Town Meeting by outlining the circumstances that have gotten us into this mess.

Prior to recently announced cuts, the MGH was spending at an annual rate of $19 million in excess of its revenues. Coming into this fiscal year, we had a deficit of $11.6 million. The Board of Trustees authorized use of last year's "rainy day" reserves to decrease the deficit to about $5.8 million. But the state's failed promises added about $5 million to that number. And the cost in revenues due to overly optimistic admissions goals added another $2 million to the deficit.

"We took the issue to the Board of Trustees," remembered Dr. Buchanan, "and they agreed with us that to permit this to go on would be to put the institution in substantial jeopardy."

To stay in line with the $5.8 million deficit the board had originally approved, the MGH had to cut the budget by about 6.4 percent.

But by the time of the Town Meeting, everyone knew about the layoffs and many employees had read or heard about the State's broken commitment of monies to hospitals. So Dr. Buchanan talked in detail about what was on most people's minds—how decisions were made and were they fair.

"I'm confident from the mail I have received that there is a widespread feeling that we could have done a better job of reducing the budget," he said. "And I am willing to accept that that's a real possibility.

"It is perfectly clear that what we did is a very human endeavor. It is imperfect. But one thing that you cannot know is that we have anguished over how to deal with this problem," he said.

Nonpersonnel cuts were made first. But administrators still had to cut 3.1 percent from the personnel budget which meant laying off 118 employees.

But was it fair? How can we afford new buildings when we can't afford people? Had we moved faster, could we have avoided layoffs? And was everyone affected equally? All of these questions Dr. Buchanan addressed.

How fared the physicians?

MGH physicians are primarily supported by research grants and contracts, and on fee-for-service income from patients. The hospital offers them minimal support

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through the general fund.

"We made these cuts across the board," said Dr. Buchanan. "The fact is that the physicians' general fund support was cut the same amount as the general fund support for everybody else in the institution."

The work on the White Building Lobby is nearly complete. And besides questioning the choice of color, many also question the cost.

George Robert White left the hospital a $14 million endowment for the building. By law, the income from the endowment can not be used for anything other than the restoration and care of the building.

Making the lobby temperature more comfortable for White Building information desk employees in the extremes of winter and summer necessitated ripping apart ceiling and walls. Repairs and painting had to follow. The restoration will return the lobby to its original appearance when it opened in 1938.

When the hospital applied for a certificate of need in 1985 to build the new inpatient towers, the research showed that the new facilities, which would be more cost efficient to run than some of the older buildings, would save the hospital $7.5 million. And like the George Robert White endowment, funds for the towers come largely from donors who have restricted the use of these monies to this project.

"Those dollars cannot be used to support the operations of the hospital," said Dr. Buchanan. "They must be used to build that tower. That's what the donors intended, that's what they restricted the money for."

And Dr. Buchanan pointed out that the new physicians' office building, now under construction, will be self financing and by increasing the number of physicians in practice at the MGH, will help to increase admissions.

"It makes good economic sense to get on with these projects," noted the General Director. "And these things are being done at no expense to the ability of this institution to keep its workforce and pay them."

Did we wait too long to deal with this problem?

"The governor made his decision very abruptly," said the General Director. "I think you would admit that we moved very rapidly after that decision was made." And moving quickly meant smaller cuts because the monthly saving could be spread over more months left in the fiscal year.

Questions from the audience

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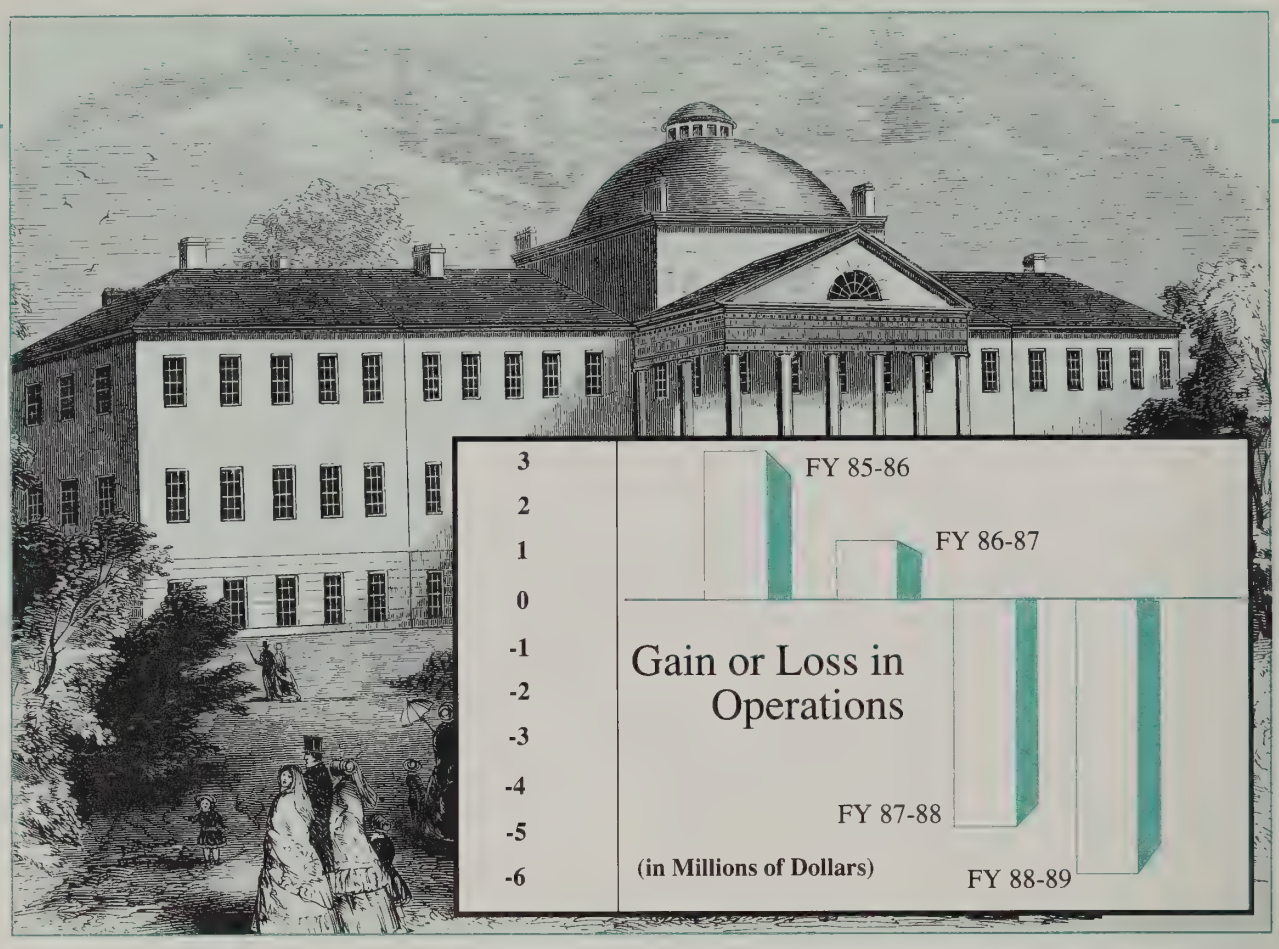
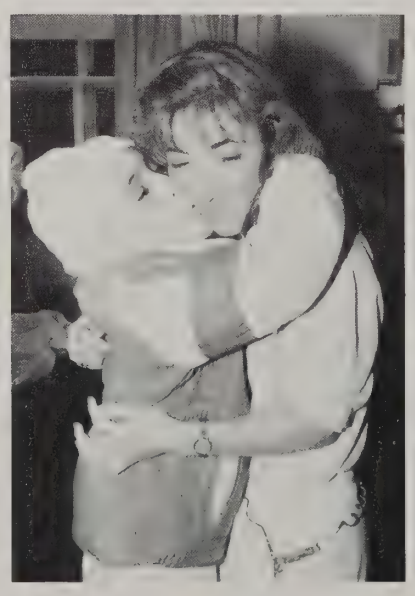


"I think one of our biggest financial strengths is our reputation as an institution that provides quality patient care, teaching, and research," said Richard R. Crater, Director of Fiscal Affairs. "That reputation will allow us access to markets, resources, and networks that will help us remain strong."

Armenian children receive treatment at the MGH

Twelve-year-old Gayane Gasparian was discharged from the MGH last month after undergoing surgery for injuries she suffered when her school house collapsed on her during the recent Earthquake in Armenia. Ms. Gasparian was one of four young victims of the Armenian earthquake who arrived at the Massachusetts General Hospital last month for two to three months of treatment in the MGH Children's Service.



Communication is 93 percent nonverbal. Here Gayane Gasparian, who speaks little English, gives an affectionate goodbye kiss to her primary care nurse Julie Pereira. Ms. Gasparian will stay in Watertown and attend an Armenian school while she awaits a return to the MGH for treatment of an injury to her hand. Coincidentally, the English translation for the name of Ms. Gasparian's hometown in Armenia is "Watertown."

The four, aged 9 to 14, are among a group of 37 brought to United States hospitals for advanced treatment. Ten American hospitals are participating in the undertaking, which is being coordinated by Project Hope.

A group of eight American doctors — including four MGH physicians — went to Moscow and Yerevan, Armenia on behalf of the project in late January to visit children still hospitalized from the disaster and to select a group that could most benefit from care here.

According to Dr. John Remensnyder, an MGH plastic surgeon and Chief of Staff for Shriners Burns Institute, some of the major criteria for selection of the children were open fractures and osteomyelitis (inflammation of the bone marrow), as well as micro-vascular and tendon injuries, which can be repaired or alleviated only by advanced surgical techniques, and upper-extremity amputations for which prosthetic devices are available here but not in Armenia. Often the children can profit from such surgery if treatment is not put off too long.

Dr. Remensnyder said that the group of volunteer doctors and

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Support Center

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off, they were encouraged to go to the Support Center. Each individual was assigned to a staff member in Human Resources who would make sure that the person's needs were met. Social Service was available to provide counseling if needed.

In the first two days of layoffs, the support center saw 75 of the 118 people involved, many accompanied by their supervisor or a representative from their department. "Often the supervisor would stay with the person a good part of the day," said Ms. Rice. "The mood was sad and somber, very much like a wake. But as in a wake there was a feeling of support."

Laid-off employees could participate in a variety of workshops set up by Training and Development including job search strategies and effective interviewing. As well, Training and Development helped employees write resumes and cover letters and provided typing and photocopying services.

There were representatives from the State Department of Employment Security to answer questions on unemployment insurance. And the MGH Benefits crew reviewed information on insurance, severance pay, and other issues of concern to employees.

Communications set up telephones in the Bulfinch Con-

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other positions become available within the year. In the first two days after the layoffs, 28 of the 118 were found new positions in the MGH.

MGH administrators are confident that the quality of patient care at the MGH will be unaffected by these cuts. Yet the amenities that tend to soften the hospital environment may be affected.

"We will not compromise on the quality of what we do for our patients," said Dr. Buchanan. "But our customer satisfaction is at risk. Our patients may have to wait a little longer for some services. The brace shop, for example, may need more time to fashion that leg brace you require." As well, it may be more difficult to get through to the hospital's switchboard during peak hours.

Some causes for the crisis

"The things that the Governor decided to do cost us $5 million in revenue this year alone," said Dr. Buchanan. "We never expected the Governor would change his mind in midstream and deny us those promised dollars."

Governor Dukakis, through the universal health care law, committed to provide Massachusetts hospitals $77 million to help cover the costs of providing free care and $100 million to help cover Medicare shortfalls for fiscal years 1989-90. And the legislature appropriated $37 million to cover Medicare shortfalls for fiscal year 1988. But in the face of a near $700 million state deficit, hospitals won't see those funds.

Under the law, the MGH would have received $2.8 million last year to cover Medicare shortfalls (the difference between what Medicare paid towards increased costs and actual inflation). Since 1985, Medicare has paid a smaller portion of charges for its patients at the MGH, from 85.5 percent of charges in 1985 to 73.2 percent today.

"We have gone from a situation where we made a narrow surplus on each Medicare case to a situation where we have a 4 percent loss on each Medicare case," said Dr. Buchanan.

The remaining $2.3 million of the MGH current deficit comes from the projected inability to increase admissions by six percent. Under the new universal

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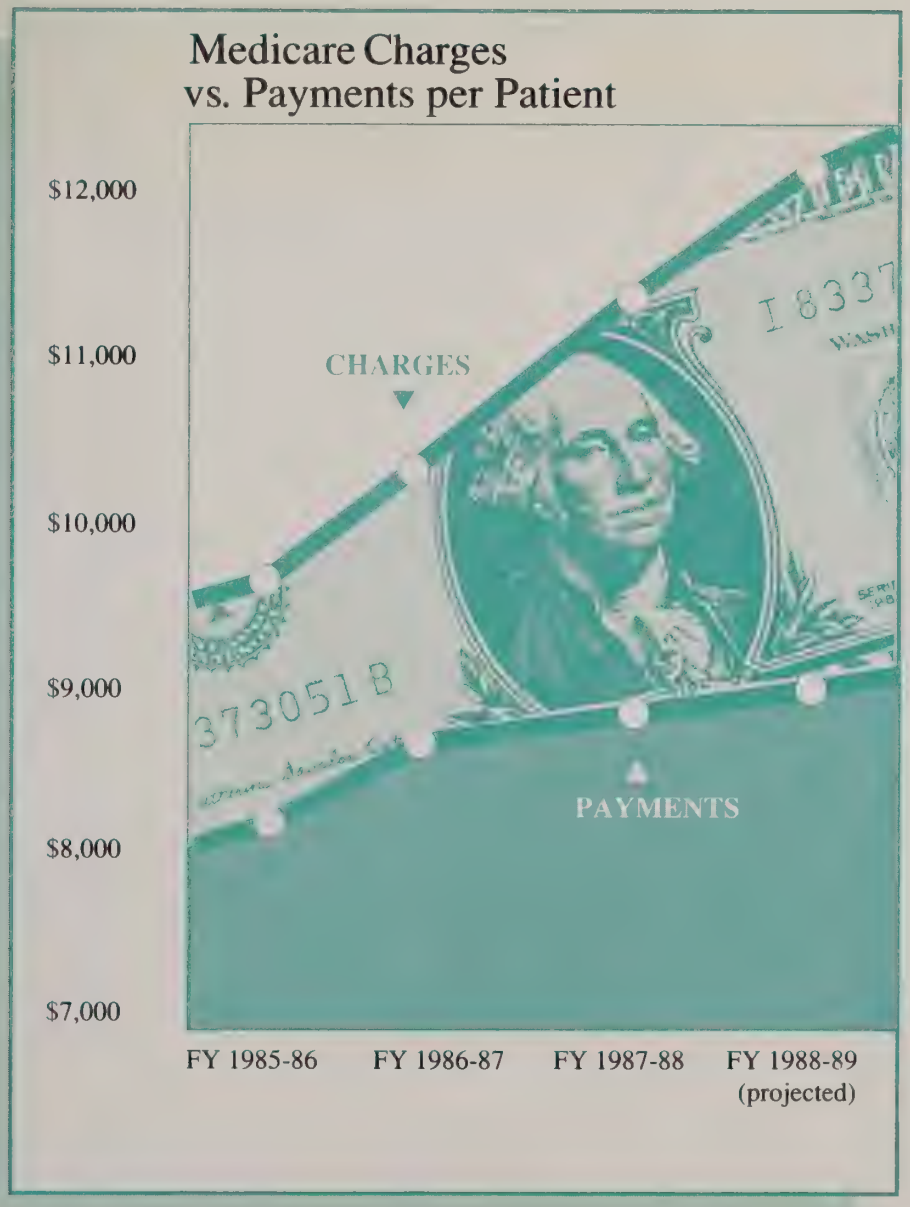
"The federal government instituted the prospective payment system for Medicare to give hospitals incentive to constrain costs," said Catherine J. Robbins, Associate Director of Fiscal Affairs. "But those constraints have come at a price—the price of hospitals struggling to survive."



Since 1985 the MGH Medicare discount (the difference between what Medicare paid towards increased costs and actual inflation) has almost doubled, from 14.5 percent of charges for patients in 1985 to 26.8 percent today.

"We have been cutting costs significantly over the last few years," continued Ms. Robbins. "But third party payers continue to expect hospitals to provide the same kinds of services for less reimbursement than they have received in the past."

Mr. Crater pointed out, "We have significant hurdles to overcome. The federal government would like to continue to severely cut Medicare. It is very difficult to predict how far that pendulum will swing before it starts to swing back in our favor.

"I think it's fair to say that in the next five years we will face major challenges in order to bring the budget into balance. We are obviously going to try to deal with these issues the best we can so that we don't continue to have the kinds of losses we are having."

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addressed specific budget reduction measures like the loss of evening cafeteria service on weekends and holidays (a savings of $500,000) and elimination of Nashua Street shuttle service during the day (a move which saved the hospital $100,000). And one MGHer questioned the increase in the employee's share of the health insurance premium.

"There is no question that nationwide, employers are asking employees to pick up ever larger portions of the health care benefit because the costs have gone up so very high," said Dr. Buchanan. "Yet people make the assumption that insurance premiums are going up because hospitals are driving them up with their charges and their costs."

But between 1986 and 1988, Dr. Buchanan pointed out, the premium cost on Blue Cross Blue Shield Master Medical in Massachusetts went up 39 percent while the portion that went to hospitals decreased by 10.5 percent.

"The insurance companies in large part are rebuilding their reserves, which have gotten low, and paying for their new enterprises, HMOs and PPOs, by transferring those costs to their traditional subscribers," he said.

But perhaps what was upmost in employees' minds was the question of future layoffs. Dr. Buchanan admitted being unsure. Much depends on what the federal government does with Medicare and how the nation will deal with the questions of cost and access to health care.

"It is not understood that what we do is by necessity expensive," said Dr. Buchanan. "And I cannot anticipate what the Congress is going to do with Medicare. That is where the real problem is."

Since 1981 the federal government has cut $30 billion from the Medicare budget. And cuts in the program, proposed in President Bush's budget, would strip hospitals of another $100 million in revenues.

Dr. Buchanan ended the Town Meeting by thanking MGH employees for their help and perseverance. "By and large, after an episode that has got to be regarded as an acute, severe physiologic insult to a remarkable organization," he said, "I have found the general reaction extraordinary.

"I would not say the reaction was positive. But I would say it was adaptive and accommodating. And it was a reaction of concern for those directly affected, yet still understanding that society has dictated to us that, at the moment at least, we must curtail our resources, and we must endeavor to do what we have done with less."

Dr. Buchanan pointed out that caring for more inpatients, as well as realizing our fundamental mission, would also under current Massachusetts law help fight deficits in future years.

"We tried to assess how the changes we were contemplating would affect our ability to serve," he said. "That ability to serve is not only important because what it means in human terms to the many people who seek our help, but it is also crucial to our ability to generate the revenues we need to keep this establishment going."

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Photos processed by MGH Photo Lab

Support Center

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ference Room so that employees could follow up on job leads. And an answering service and message center provided by the hospital helped ensure that employees would not miss important calls.

The Support Center also established a resource library, listing of positions open within the hospital, job listings from other organizations, and information on job fairs. Employees who drove their cars in were given parking passes.

By the following Monday after layoffs had begun, 28 employees had been placed in other positions within the hospital. "Some people went on interviews the first day," said Ms. Rice. "Others just came to get support. It all depended on where they were in the process of dealing with the change."

"Social Service was there for two reasons," said Evelyn Bonander, Director of Social Service. "First, because we had specific information on community services that might be available to help employees meet immediate needs.

"Second we wanted people to know that we were there as a safety net to help support employees and help them grieve."

Having to abruptly leave an organization where you have established relationships is painful. There is a period of mourning.

Ms. Bonander pointed out that the employees who remain have difficulty too. There is sadness at seeing colleagues leave. Or employees might feel guilty about surviving the cuts. Some employees feel angry and question if they want to remain with the organization. And there is anxiety as employees wonder if they might be the next to go.

"It was a real collaborative effort between all of the departments involved to come together and try to help these people," said Thomas E. Rothwell, Vice President of Human Resources.

Ms. Lang related a story of one woman who came in and started to cry. "One person got her some kleenex," said Ms. Lang. "One person got her coffee. One person helped her find a seat. Everyone began to move at once. It was like one mind supporting this person."

"Many of the things we provided, nobody actually asked for," said Ms. Rice. "It was that unspoken request just to have someone there."

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hospitals gathered together in the humanitarian effort in response to a request from Project Hope, which had received pleas for such help from Armenian communities across the United States.

Children in the entire group of 37 range in age from 2 1/2 to 17. The mother or father of each has accompanied the child here.

Dr. Remensnyder and Dr. Goudsouzian were visibly moved by their experience in Moscow and Armenia, and Dr. Remensnyder said that only after his return had he been able to talk about the devastation he saw and the children's suffering.

Among the MGH selection team in addition to Drs. Remensnyder and Goudsouzian were Drs. Edwin T. Wyman, Jr., orthopedic surgeon; and Stanislas Szyfelbein, MGH anesthesiologist and Chief of Anesthesiology at Shriners Burns Institute. Drs. Susan Briggs, MGH surgeon, and Gregory Dumanian, surgical resident, accompanied the children on the flight back from Germany. Drs. Goudsouzian and Dumanian speak Armenian.

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health insurance law, hospitals are economically rewarded for increasing admissions. Despite the highest increase in admissions at the MGH in modern times, computer printouts show us falling below the targeted six percent.

What is happening at the MGH is symptomatic of a nationwide hospital crisis. The costs of delivering services climb while 3rd party payers tighten their belts and reimburse less and less for those services.

Yet utility companies, pharmaceutical companies, suppliers of equipment and other essentials aren't asking less for their supplies and services. And hospitals must still survive in an increasingly competitive labor market.

Hospitals in highly regulated states suffer the most. Most states have been allowing hospitals to charge private insurers like Blue Cross more to compensate for federal cuts in Medicare. Yet states like Massachusetts and New York keep tight reins on how hospitals charge.

The result in New York is a crisis that has gotten so bad many hospitals can't afford essential supplies. In response to deficits, New York hospitals laid off 1,000 workers last year and will lay off more this year. One teaching hospital there went from a $10 million deficit to a projected $40 million deficit in one year. And another hospital in New York this year laid off 600 employees.

"We are not alone," said Dr. Buchanan. "Indications are that all of the major Boston teaching hospitals are going through a similar wrenching fiscal process."

According to a recent Boston Globe article, hospitals like the Beth Israel and University Hospital are also planning to freeze hiring and eliminate some positions, in Beth Israel's case in the coming fiscal year. And smaller hospitals like the Sancta Maria in Cambridge are facing even harder choices. The Boston Globe reported recently that the Sancta Maria will convert to other functions because it can no longer survive financially as an acute care facility.

So what might the future hold for the MGH?

"The MGH is in no danger of closing," said Dr. Buchanan. "But there are painful steps ahead of us.

"We still must reach our admissions goals, or we will be in a vicious cycle and have to reduce our expenses again next year. That is something that pains me to even think of."

MGH HOTLINE

6 April 1989

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The Huggins Cytoglomerator made blood banking history

The MGH uses almost 30,000 units of blood each year. Thirty years ago, we and other health care facilities would have had to depend upon blood with a shelf life of only 21 days.

From 21 days to about 20 years is how far we have come. Thanks to the Huggins Cytoglomerator, we can now freeze and store blood for years on end.

Not only does this increase our ready blood supply and help meet unanticipated demand, it also allows some patients to donate their own blood before surgery, thus reducing the risk of infectious disease.

The Huggins Cytoglomerator retired last month. It has been replaced by its computerized counterpart. "The new automated machines still employ many of the same techniques, but they are much less labor intensive," said Patricia Ellinger, Chief Medical Technologist in the Blood Transfusion Service.

The Huggins Cytoglomerator came about in 1964 after Dr. Charles E. Huggins, Director of the Blood Transfusion Service, discovered a way to freeze and reconstitute red blood cells.

Dr. Charles E. Huggins looks on as another sugar solution is added to recently thawed red cells. The sugar causes the red cells to clump and settle to the bottom of the bag.

Before the advent of Dr. Huggins' freezing technique, blood had to be discarded after three weeks.

It is now common practice to store frozen blood for three to ten years. "We have blood that has been in the freezer for 20 years," remarked the MGH surgeon who is also Associate Professor of Surgery at Harvard Medical School. "And a number of studies have shown that even after 20 years of storage there is no apparent deterioration."

In the course of doing research in England on freezing organs such as lungs and kidneys, Dr. Huggins and other investigators decided to use red cells as a model. "We picked the human red cell as a model system to learn principles that might be applicable to the preservation of organs," he remembered.

Researchers had already found that freezing destroyed red cells. When blood is subjected to very low temperatures, ice forms. The salts and proteins that cannot enter the ice structure crystallize into formations that pierce and damage the red

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MGH reservist helps in Honduras

Rochelle Butler has two loves—nursing and the military. She often brings them together with her work as a medic for the Army Reserve—as she recently did in Central America.

Ms. Butler, an LPN at the MGH for 16 years, traveled to Honduras in January with a medical unit of the reserve.

"I just wanted to see what it was like in another country," she said. "It was a real eye-opener. I can understand the Peace Corps more now and the need for it."

Her first week was spent at the military hospital in Palmerola. With 27 other reservists, she helped treat hospitalized patients there and immunize women and children in outlying villages.

One of her greatest challenges was a four-year-old boy whose hip had been crushed in an accident three years earlier. He was hospitalized for treatment of an ulcerated knee and surgery to correct a bowel problem.

The young boy was unable to walk or stand because his legs had healed improperly. He got around by pulling himself about with his hands. A resulting cut on one knee had turned to an infected ulcer. Physicians treated the knee, but his legs could not be straightened without more advanced medical and surgical care.

The surgery on the child's bowel was successful, but for the rest of his life he must wear a colostomy bag so waste products can be deposited outside his body.

Ms. Butler had one week to teach his mother how to change and irrigate the bags. "It was very difficult at first," she said, "because the mother did not really understand what the child's problem entailed. And it was hard trying to communicate with her through an interpreter."

But by the end of Ms. Butler's stay, the mother was able to change and irrigate the bags, and clean and change the dressings on her son's knee. "I don't know what will happen when she takes him home," the MGH nurse said. "She has other children to care for, and he is going back to unsanitary conditions. But it was rewarding to teach her the skills required to take care of her son properly. At least she has the knowledge and the resources now."

In their second week in Honduras, the reservists traveled by helicopter to the villages of Las Flares, San Rafael, and La Liberated. There they administered diptheria, measles, and tetanus shots to women and children.

They also ran an ulcer clinic to treat a common affliction of village

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Rochelle Butler, LPN, shared a moment of fun with a hospitalized Honduran child and his mother. Ms. Butler had one week to teach the young mother how to care for her son after discharge.

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women in Honduras. Because of the amount of work which involves walking and standing, and because of frequent pregnancy, the women often develop open ulcers on their legs. The medics washed and bandaged the wounds.

Ms. Butler, who has worked with the Army Reserve for almost 15 years, feels the health problems of the villagers are mostly due to poor living conditions. Many of the children in the village had worms because livestock roamed freely in areas where the villagers lived and worked.

"I just wondered what would happen when we left," remarked Ms. Butler. "How much of a difference did the little time we spent there really make?"

The MGH nurse pointed out that though they treated the children for worms, unsanitary living conditions would cause the problem to reappear in several months. "If you make a child feel well for three months, it is worth it," she said. "But you really have to get to the root of the problem to make a difference."

The problem is poverty. "Each village was different, but the poverty was the same," said Ms. Butler. "They need education first, and then they need to learn something else other than poverty."

Ms. Butler told a story of one village that had received assistance several years ago. As a result of interaction with American medical personnel, two of the women in the village left to attend school. They returned to start a school in their own community. Ms. Butler hopes that perhaps the reserve's short-term intervention will have this sort of long-term effect.

Ms. Butler came to Boston from Alabama 22 years ago. She worked as a cook until she saved enough money to go to nursing school to get her LPN certification. She will soon enter the RN program at Somerville Hospital. "Nursing is my greatest joy in life," she said. "I can't think of anything I love more than taking care of people."

Ms. Butler feels much the same about the military. And through her work as a medic, she has found a way to combine her two life passions. "The work in Honduras was hard," she said, "but I never got tired because I love helping people. The experience brought together everything I care about."

It's a new day in ministry to the sick

Author Norman Cousins, who, 25 years after being diagnosed as having a severe heart condition, laughingly estimated that his heart had then provided him with 877 million more beats than doctors had thought possible, will join health and pastoral care professionals here in a two-day program April 18 and 19 to examine ethical and spiritual issues in today's health care setting.

Massachusetts Public Health Commissioner Deborah Prothrow-Stith and ABC TV's Dr. Timothy Johnson also will participate in the program. The symposium, "It's a New Day in Ministry to the Sick," is sponsored by the Pastoral Care Department of the MGH and is being coordinated by the Rev. Phillip M. King, Director of the Department.

Norman Cousins will open the event with a talk on "The Person as Healing Agent" at 5 pm April 18 in the Massachusetts Eye and Ear Infirmary's Meltzer Auditorium. The well-known author also chronicled his comeback from ankylosing spondylitis, a progressive disintegration of spinal connective tissue, in the widely read book, *Anatomy of an Illness*. He was struck with that disease in 1964, 10 years after his dire heart diagnosis, and fought back with humor, will power, and unorthodox treatment as well as accepted medical help. Dr. Cousins now holds an honorary M.D. and is Professor of Medical Humanities in the School of Medicine at the University of California at Los Angeles.

After a reception following Dr. Cousins' talk, a three-way response to the lecture will be featured in a dinner program at the MGH. The three discussants will be Dr. Arthur Barsky, MGH psychiatrist and author of *Worried Sick: Our Troubled Quest for Wellness;* Dr. Herbert Benson, Director of the Mind/Body Clinic at New England Deaconess Hospital, Associate Professor of Medicine at Harvard Medical School, and author of *The Relaxation Response and Your Maximum Mind;* and Ruth Purtilo, Ph.D., Henry Knox Sherrill Professor of Ethics at the MGH Institute of Health Professions and Ethicist-in-Residence at the MGH.

An all-day symposium will convene at 9 am on April 19 in the Shriners Burns Institute auditorium with a keynote address by Dr. Prothrow-Stith discussing "The New Look in Health Care: Factors Affecting Patient Care in the Hospital Today." Dr. Johnson will serve as respondent to the keynote speaker.

The symposium will address the role of hospital pastoral care in connection with such current health

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In General

Helping to revise the hospital's smoking policy was just practice for MGH physician **Dr. Nancy A. Rigotti**. She had something on a national scale in mind.

Dr. Rigotti, who is also Associate Director of the Institute for the Study of Smoking Behavior and Policy at the Harvard Kennedy School of Government, wrote part of the 1989 Surgeon General's Report on Smoking. She was one of the Surgeon General's four scientific editors.

The MGH physician, an Instructor in Medicine at Harvard Medical School, wrote and edited a large part of chapter seven which assesses the effectiveness of legislation, education, and economic controls on curtailing the use of tobacco products. The original Surgeon General's report, written 25 years ago, was the first public document to warn of the dangers of cigarette smoking.

Dr. Rigotti described her findings from a "good news, bad news perspective."

"Forty percent of the American population smoked in 1965, when the first Surgeon General's Report was issued," she said. "In 1987 only 29% of the population smoked. There has been tremendous progress in the last quarter century."

However, the bad news Dr. Rigotti points out, is that smoking is still responsible for one in every six deaths, remains prevalent among Black Americans, blue collar workers, and economically disadvantaged groups, and continues to attract young users, especially girls.

In fact, Dr. Rigotti predicts that smoking will become a women's health issue by the mid 1990s when the prevalence of smoking among women is expected to outpace that of men.

Dr. Nancy Rigotti shakes hands with Surgeon General Dr. Everett C. Koop. Dr. Rigotti helped write the 1989 Surgeon General's Report on Smoking that for the first time labeled nicotine as addictive as drugs like cocaine and alcohol.

Dr. Denise J. Strieder, pediatrician in the MGH Children's Service, and Associate Professor of Pediatrics at Harvard Medical School, is the recipient of the 1989 Chadwick Medal. The Chadwick Medal, the highest honor awarded by the Massachusetts Thoracic Society (MTS), is made to individuals for "meritorious contributions to the study and treatment of tuberculosis and other thoracic diseases." Dr. Strieder received her award at the MTS Annual Meeting in March. Last year's winner was Dr. Homayoun Kazemi, Chief of the MGH Pulmonary Unit.

Dr. Denise J. Strieder of the Children's Service, recipient of the 1989 Chadwick Medal.

Dr. Deanna R. Pearlmutter, Director of Surgical and Psychiatric Nursing Services, has been named a Radcliffe Visiting Scholar. Last month Dr. Pearlmutter presented a paper titled ***"Education of Women for a Traditional Role: Nursing"*** at the Radcliffe conference, ***Restructuring for Reality: An In-Depth Look at Selected Issues***.

Huggins

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cells. "The red cells are literally pickled in brine," said Dr. Huggins.

Investigators had shown that glycerol, a compound produced through the fermentation of sugar, acts like an antifreeze to protect red cells during freezing. When added to packed red blood cells, it reduces ice formation, the crystallization of salts, and the subsequent damage to red cells.

But efforts to reconstitute the frozen red cells had proved impractical because of the difficulty of removing the glycerol after the blood was thawed.

In the course of Dr. Huggins' work, an idea took shape. Perhaps, he thought, this process of freezing blood might be useful beyond its role as a research model for organ preservation.

"We started in this purely as a problem of science for science sake. But what if we could take a pint of blood, add the protective compound glycerol, freeze and store it, and then remove the protective compound after thawing. This process would obviously have clinical application in the field of blood banking."

Physicians had long observed that blood clumps in the presence of dextrose, a type of sugar. Residents were warned never to administer dextrose through the IV tube after a blood transfusion. The addition of the sugar compound would cause the blood to clump and clot in the tubing.

But Dr. Huggins thought this "mistake" might work to his advantage. Adding dextrose to the solution of glycerol and blood after it was thawed caused the red cells to clump and settle to the bottom of the container. The glycerol left at the top was poured or siphoned off. Once that was done, the red cells were resuspended in saline solution.

The Cytoglomerator gets its name from this reaction. The clumping that occurs in the presence of dextrose is called agglomeration. Cyto comes from the Greek word meaning cell.

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BTS Technician George Jones removes glycerol from one of the last units of blood processed on the Huggins Cytoglomerator. Mr. Jones has 30 years experience with Dr. Huggins' method of freezing and thawing red blood cells.

What's happening

Osteoporosis study needs volunteers

Postmenopausal women 40 years of age or older are needed for a study on the prevention of osteoporosis using intranasal calcitonin. Volunteers will receive a $150 stipend, free physical exam, biochemical evaluation, dietary assessment, and bone density measurements. For more information call David M. Slovik at ext. 6723.

Management Engineering has moved

Information Projects/Management Engineering has moved from River Street to MGH East. Its new mailing address is MGH-149, E. 13th Street, 5th Floor, Charlestown, MA 02129. Its in-house mailing address is CNY-5.

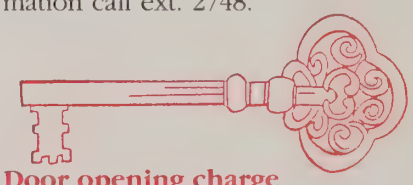
Modified Aerobics for MGH Employees

The Physical Therapy Department is sponsoring a modified aerobics program for employees. The 12-week course begins April 24 and meets Monday, Wednesday, and Thursday from 5:30 - 6:30 pm in the Physical Therapy Gym. A physician's written referral is required for participation and the fee is $80. For more information call Mary Alexander, PT, at ext. 2963.

HIV testing

The GID clinic is a walk-in unit for the evaluation and treatment of many sexually transmitted diseases, such as chlamydia, herpes, syphilis, and gonorrhea. The clinic is now offering counseling and anonymous testing for HIV. This testing is available to employees 8:30-11:00 am, Monday through Friday, in WACC suite #428. For more information call ext. 2748.

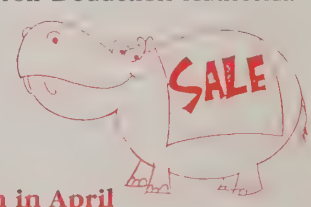
Ice Capades stars Mickey and Minnie Mouse came to the MGH Children's Service to entertain the young patients on Valentine's Day. Here Mickey charms young Lois McKnight.



Door opening charge

One of the budget trimming measures you have all undoubtedly heard about is the charge by Security for opening doors. Due to reductions in force, the Department of Police and Security must find ways to more effectively use its resources. Last year it received 1,350 requests from people who were locked out.

Therefore, Security will now charge $5 to open doors for employees who have forgotten or misplaced their keys. Employees who need doors opened will have to show a valid MGH ID badge and sign a Payroll Deduction Authorization card.



Gold rush in April

Does 20-70% off of retail cause you to prick up your ears? Well listen closely. A 14 karat gold and silver jewelry bonanza, sponsored by the Ladies Visiting Committee, will be held on Thursday and Friday, April 13-14, in the WACC Lobby. Pro-

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Call to service is in their blood

Technician George Chappell takes a blood donation from a Simpson serviceman.

Servicemen from the U.S.S. Simpson are vying for the distinction of being some of the MGH's most faithful blood donors. In the last two months 87 servicemen from the Simpson have donated blood to the MGH Blood Transfusion Service.

Many servicemen from ships docked in Boston harbor have given blood at the MGH.

Dr. Charles E. Huggins, Director of the Blood Transfusion Service, and Mr. Harold E. Warford, Assistant Director, Community Relations, have an interesting way of recruiting the donors.

Dr. Huggins' apartment overlooks the harbor. A reserve officer in the Navy, he spots incoming ships and informs Mr. Warford of the ships' identification numbers. Mr. Warford follows through by contacting the Ship Builders Association to find out who the Chief Medical Officer on board is. It's all a matter of negotiation from there.

The Simpson was here for nine

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Huggins

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And thus the Cytoglomerator is a cell clumper. More importantly, it is the machine which made the preservation of blood for transfusion practical for the first time.

The MGH has the capacity to store 1,270 units of frozen blood. And of the 2,300 units of blood used here on the average each month, about 10% is frozen.

"The usefulness of this process lies in four areas," said Dr. Huggins. "First, you can preserve blood for many years; second it's useful to freeze your own blood for upcoming surgery; and third, it is extremely valuable for storing rare types of blood. As well, the white cell removal is very helpful for people who have reactions to white cells."

In fact, the use of frozen deglycerolized blood (the product that resulted from Dr. Huggins' technique) helped prevent adverse reactions to transfusions. Some people may be sensitive to other people's white cells. But since cold temperatures destroy white cells, using blood that has been frozen is safer for the patient.

Dr. Huggins said, "We found that the most effective way to minimize the possibility of transfusion reactions against white cells was to use frozen deglycerolized red cells." More recently, filters have been developed that efficiently remove white cells.

The MGH has witnessed many developments in blood banking. Physicians are now able to stretch blood supplies farther by using components to meet specific patient needs—for instance, fresh frozen plasma to treat coagulation disorders like hemophilia, white cells to fight infection, platelets to promote clotting, or red cells which carry oxygen throughout the body.

Advanced preservation and storage techniques allow patients to donate their own blood before surgery. And intraoperative autotransfusion actually recirculates the blood a patient loses during an operation. We even have pheresis techniques that allow donors to give a specific blood component, platelets for example.

"We've gone through many cycles in blood banking. But this is the decade of blood conservation," said Dr. Huggins. "In the early days of transfusion, reactions were very common and people were very judicious in the use of blood."

However by the 1980s, Dr. Huggins points out, testing techniques to determine compatibility were very good. Disposable plastic equipment was in general use and reactions were less common. Thus transfusion became routine.

"But now that we recognize that disease can be transmitted by blood, we've got to get the routine out of blood transfusion," said Dr. Huggins. "We are making every effort to minimize the transfusion of blood from one person to another. And we are now using substantially less blood than we did in 1982.

"My objective is to try to put myself out of business," he said. Dr. Huggins won't likely meet that goal. But blood banking has progressed a great deal in his 36 years at the MGH. And the Huggins Cytoglomerator was a milestone on the way.

The MGH HOTLINE is published twice monthly by the MGH News Office.

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Doris G. Schrekengaust, *Copy Editor*

From left to right are Dr. Charles E. Huggins, Director of the Blood Transfusion Service, Lt. Cmdr. Richard Rush, Chief Medical Officer Donald Wells, and Mr. Harold Warford, Director, Community Relations. This is the team that brought the Simpson sailors to the MGH's port.

Call to service

from page 3

weeks for repairs after touring in Grenada and the Persian Gulf. It was the U.S.S. Simpson and its crew that engaged in an altercation with an Iranian ship in the Persian Gulf in December in the first surface to surface missile combat in history.

The Simpson's home port is Newport, R.I. But many of the 150 servicemen on the frigate are from Massachusetts. They plan to return in June for Bunker Hill Day and to donate blood again at the MGH.

Paula MacMillan, Supervisor of Donor Registration, checks the temperature of a U.S.S. Simpson serviceman who donated blood to the MGH.

BTS nurse Jennifer DuBose keeps them laughing—it improves circulation.

What's happening

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Computer Science and Medical Records make their moves

The Lab of Computer Science is moving from Clinics 3 to 50 Staniford Street, 5th floor on April 10. The extension remains 3941.

Medical Records has moved from the Clinics and Hoffman Buildings to the new Active File Room in Somerville. To request records, continue to use the same phone numbers as usual, ext. 2470 during the day and ext. 2477 evenings and weekends.

Bed relocation

The MGH has recently reopened 27 beds and relocated others. Similar units were clustered to make patient care more efficient.

Twenty of these beds are being used primarily for the care of medical oncology patients. Two beds were opened in the RICU to accommodate more patients needing intensive care after surgery. And five beds were added to the Neurosciences/Orthopaedic services.

Neurology/Neurosurgery patients on Phillips House 6 were moved to newly renovated White 11. The surgical unit on Phillips House 5 was moved to the sixth floor. Fourteen beds were moved from Baker 5 to Phillips House 5 to create a medical oncology unit there. The Ostomy nurses group has moved to Phillips 522.

Health for all children

An estimated five million lives could be saved each year if children around the world were immunized against measles, whooping cough, and tetanus. In recognition of World Health Day on April 7, members of the Department of Nursing will highlight the plight of children through an exhibit in the WACC lobby entitled "Health for all Children."

The exhibit will illustrate the major threats to child health, effective responses to these problems, and information about organizations that are working toward solutions. In addition to the display, a slide presentation will feature photos by physicians who have provided medical care to children in various countries. Participants can also view a video summarizing current child health issues. For more information, call Ann Schulz at ext. 3140.

Spring up with Training and Development

The Spring Calender is out! Training and Development will offer a variety of programs in communications, office skills, leadership, professional development, English as a second language, and health and wellness.

Got a tough job? This dynamic workshop will be offered for employees from service areas. You will have a chance to brainstorm and develop techniques for handling difficult and frustrating situations that arise on the front lines.

Telephone Techniques is specifically designed for employees who speak English as a second language. Also specially tailored for this group is a course titled ***Stand Up for Your Rights!*** which focuses on handling difficult situations often worsened by the language barrier.

Department heads, managers, and supervisors are once again invited to attend the ***Frontline Leadership Program.*** A segment of this program called ***The Core: Interpersonal Skills*** is available to employees. And MGHers who want to further develop their management skills can take one of two new courses: ***Managing Change and Fostering Innovation***, or an exciting problem solving skills course.

Pick up your copy of the Spring Calendar outside the Training and Development Office on Bulfinch 2, in the Post Office, Payroll, or in the boxes along the White Building corridor. Calendars will also be posted on bulletin boards throughout the hospital, at the Navy Yard, and at the Health Centers.

Ministry

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care issues as the financial squeeze, labor shortages, advances in biological studies and technology, teenage depression and violence, AIDS, and the growing population of elderly. An afternoon program of workshops will highlight how newly rediscovered practices such as meditation, prayer, and sacramental visitation, as well as attentive listening and counseling, are being used in some settings in an effort to help patients to recover, to require less pain medication, and to act upon the will to be well.

The program is designed for hospital chaplains, parish clergy, lay visitors, health professionals, and others with related interests. For further information call [illegible]-2220.

MGH HOTLINE

27 April 1989

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Bartlett 9, Extension 2206

When Nancy Albanese throws this paper away, she knows it isn't going to waste. The MGH recycling program will save money and help relieve environmental stress by making the most of the tons of paper hospital employees use.

From trash to trees—and $$$ The MGH recycling program

A Hotline story goes through up to 40 sheets of paper before it ends up on the 70-pound lithofect suede stock before you. At an average seven stories per issue and 26 issues each year, I use more than 7,000 sheets of white paper annually just to produce this publication.

Three MGH employees have devised a way for me to turn my paper into dollars.

Nancy Albanese, a Patient Access Office Coordinator, has joined Bill Banchiere, Director of Environmental Services, and Wayne Newell, Materials Management Director, to manage the MGH recycling program. Beginning this month, MGH employees can recycle all of the white paper they would normally throw away—anything from letterhead stationery, to copy paper, memos, index cards, or computer paper.

The MGH pays an outside agency to dispose of the hospital's solid waste in landfills or by incineration. These agencies charge the MGH a disposal fee of four cents for every pound of solid waste we produce and a pick-up fee of about $80 per load.

When Mrs. Albanese worked in the Nursing Data Center (NDC), she implemented a departmental recycling program. She estimates that the NDC staff used up to 700 pounds of recyclable paper each month. At that rate, the Data Center's recyclable trash cost the MGH about $30 each month in disposal fees alone.

At a time when money is tight, recycling makes sense for the MGH pocket book. "For every pound of white paper we recycle, we will get a return of nine cents," noted Mr. Banchiere. "We save four cents per pound in disposal fees, and the recycling company pays the hospital five cents for each pound of waste paper."

The MGH produces about 9.5 million pounds of non-infectious solid waste per year. It is difficult to say what percentage of our trash can be recycled, but if the 80 or so MGH departments and services use close to the quantities of white paper the Data Center does each year, the hospital's trash may be the gold mine of 1989.

And recycling makes sense for

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Spring benefit for Camp Bunker Hill

Swing into spring with a food extravaganza and dance to benefit Camp Bunker Hill, a therapeutic day camp for troubled children run by the MGH Bunker Hill and Chelsea Memorial Health Centers.

On Saturday, May 6, from 7:00 pm until midnight, in the Atrium of Building 149, Charlestown Chefs will employ their culinary talents to tickle your palate. Local disc jockey Eric Johnson will provide the entertainment, and a silent auction follows the festivities.

Camp Bunker Hill serves up to 80 children from Charlestown, Chelsea, and surrounding areas. Begun in 1970 by Thomas Panowicz, M.Ed., the summer day camp provides therapeutic services in an outdoor setting.

The camp occupies 30 acres of woodland at the Hale Reservation in Westwood. Children, ages 4 1/2 to 16 can participate in a variety of activities including a challenge course designed to build self esteem and recreational activities like swimming, fishing, boating, and hiking.

Mr. Panowicz, the camp Director, says that all activities have therapeutic goals and are designed to improve the children's feelings of self worth. Referrals to the camp come from schools, parents, treatment professionals, and community agencies.

"Camp Bunker Hill is unique," said Mr. Panowicz, "because within the context of a day camp, we provide a formal therapeutic program focused on problem behaviors." He feels that the informal setting of the day camp removes the stigma attached to treatment and creates a relaxed atmosphere in which children can work through their difficulties.

Mr. Panowicz has witnessed many successes in his 19-year association with the program. "We get adults returning after years and years to tell us that the period of time they spent at camp as children was the most significant experience in their lives," he said. And a followup study conducted by camp therapists shows that participants have fewer behavior problems and often do better in school after their camp experience.

The average cost for a child to attend Camp Bunker Hill is $1,700. Though the camp receives some funding from the MGH-Bunker Hill Health Center, it needs other benefactors as well.

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MGH daguerreotype helps mark 150-year history of photography

This daguerreotype, perhaps the first ever taken of an operation anywhere, is part of an exhibition surveying the 150-year history of photography.

It is believed to have been taken around the beginning of 1847 and depicts a surgical patient under ether. The man with his hands on the patient's thighs is Dr. John Collins Warren, cofounder of the MGH and its Chief Surgeon. At Dr. Warren's right is Dr. Oliver Wendell Holmes, father of the famed late United States Supreme Court Justice, and the MGH physician who coined the word "anesthesia."

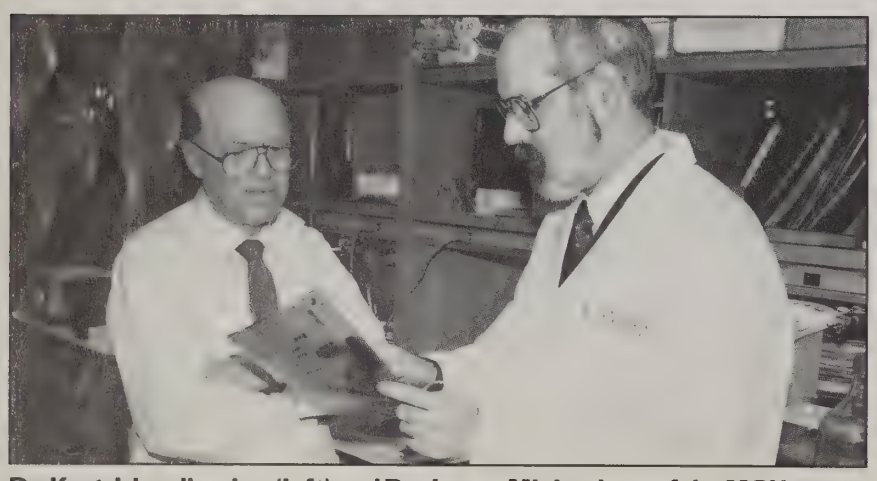
The exhibit has been organized by the Royal Academy of Arts, London, and the Museum of Fine Arts, Houston, in association with the Australian National Gallery in Canberra.

In General

Dr. Kurt J. Isselbacher, who served as Chief of the Gastrointestinal Unit for 30 years before being named Director of the MGH Cancer Center in 1987, is the recipient of the American College of Physicians John Phillips Memorial Award for distinguished contributions in clinical medicine.

Dr. Isselbacher's laboratory was one of the first to bring modern biochemistry to the field of gastroenterology. His research has advanced the understanding of fat absorption, bilirubin metabolism, and galactosemia, and he has been recognized as perhaps the leading figure in academic gastroenterology in the country.

Dr. Isselbacher, who is also Mallinckrodt Professor of Medicine at Harvard Medical School, has helped train many gastroenterologists including more than two dozen heads of academic gastroenterology units or chairmen of medicine throughout the United States and the world.



Dr. Kurt J. Isselbacher (left) and Dr. James Michaelson of the MGH Cancer Center view films of a gene experiment. Photo courtesy of The MGH News.

Dr. G. Octo Barnett, Director of the MGH Laboratory of Computer Science and Professor of Medicine at Harvard Medical School, has been named President-Elect of the American College of Medical Informatics.

Barbara Buckley, LICSW, a social worker at the MGH, lectured recently on living with AIDS to Local 509, a union of social workers and librarians connected with the Department of Mental Health.

Dr. Donald S. Kaufman, oncologist at the MGH Cancer Center and Associate Clinical Professor of Medicine at Harvard Medical School, was one of two U.S. physicians to participate in a symposium in Cyprus on advances in the diagnosis and treatment of cancer. Dr. Kaufman spoke on the management of breast cancer and cancer of the urinary bladder. The symposium was sponsored by the Cyprus Anticancer Society.

MGH social worker **Barbara Berkman** delivered a lecture recently on social work in health care at the annual symposium of the National Association of Social Work. The symposium was held in Philadelphia.

Dr. George L. Nardi, MGH surgeon and Professor of Surgery at Harvard Medical School, participated in the Celebration of the 900th Anniversary of the University of Bologna. He brought the formal greetings of the President and Fellows of Harvard University and presented them to the Grand Rector of the University of Bologna. President Lowell of Harvard presented a similar greeting on the Italian school's 800th Anniversary in 1888.

As well, Dr. Nardi was conferred the order of "Cavaliere" of the Republic of Italy by the Italian Consul General in Boston in recognition of the assistance he has provided numerous Italian surgeons and medical students over the past 30 years.

Radiologists **James A. Brink and Peter F. Hahn** recently won certificates of merit for scientific exhibits presented during the 74th Scientific Assembly and Annual Meeting of the Radiological Society of North America. Dr. Brink's exhibit was entitled, "Physical Characteristics of Gallstones Removed at Cholecystectomy: Impli-

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Camp

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The spring fling is co-sponsored by the MGH-Bunker Hill Health Center and The Raymond Group, the developers of Building 149. Tax deductible tickets are $20 per person, $35 per couple, or tables of ten for $175. Tickets are on sale this week in the WACC lobby. Tickets are also available from: Jan Swanson, MGH East (ext. 5484); Kevin Ford, Somerville/Medical Records (ext. 1593); Debbie Hill, Chelsea Health Center (884-8300); Barbara Patten, Bunker Hill Health Center (242-5706); Betty Gulla, MGH (ext. 5004); or Terry DePaoli, MGH (ext. 3644).

What's happening

Cholesterol screening marked Nutrition Month

In recognition of National Nutrition Month, the MGH Department of Dietetics in conjunction with the Employee Health Service provided cholesterol screening to MGH employees. Nurses were available to check blood pressure. And registered dietitians answered questions about cholesterol, hypertension, and diet.

Just look the other way!

Linda Thomas, RN, prepares to take a blood sample from an MGH employee. Several hundred employees trekked to the Walcott rooms for cholesterol screening during National Nutrition Month.

National Social Work Month

March was the designated month to salute the social work profession. The MGH Social Service Department hosted a variety of events to recognize the month. Ms. Lynn Sanford, LICSW, an expert clinician in the study and treatment of incest, presented "But You Hide it so Well: The Long-term Impact of Sexual Abuse" to the department and other staff. A bulletin board display highlighted the spectrum of social work services here at the MGH and the research contributions of members of the department.

Shape up with yoga

The Employee Health Service now provides a yoga class for beginners on Monday from 1:00 - 1:50 pm in Ruth Sleeper Hall. As well, a low impact aerobics class is available at MGH East on Tuesday and Thursdays at 5:15 pm in the 7th floor lounge. Contact Linda Lass-Schuhmacher at ext. 1625 for more information. Both classes cost $3.00.

Tax Sheltered Annuity Update

The interest rate on UNUM accounts has increased from 8.65% to 8.85% effective April 1, 1989. This rate increase was due to continuing negotiations and recent changes in the interest rate market. The new rate is guaranteed through December 31, 1989. For more information on Tax Sheltered Annuities contact the Benefits Office, Bulfinch 2, ext.8133.

Volunteers needed for study on fish oils

Diabetic volunteers are needed for a study of fish oils (Omega-3 Fatty Acids) in the prevention of diabetic complications. The study includes free lipid studies, nutritional analysis, and counseling. Volunteers will receive $200 for participation. For more information, call Janice Camuso, RN, at 726-2873 Monday through Wednesday.

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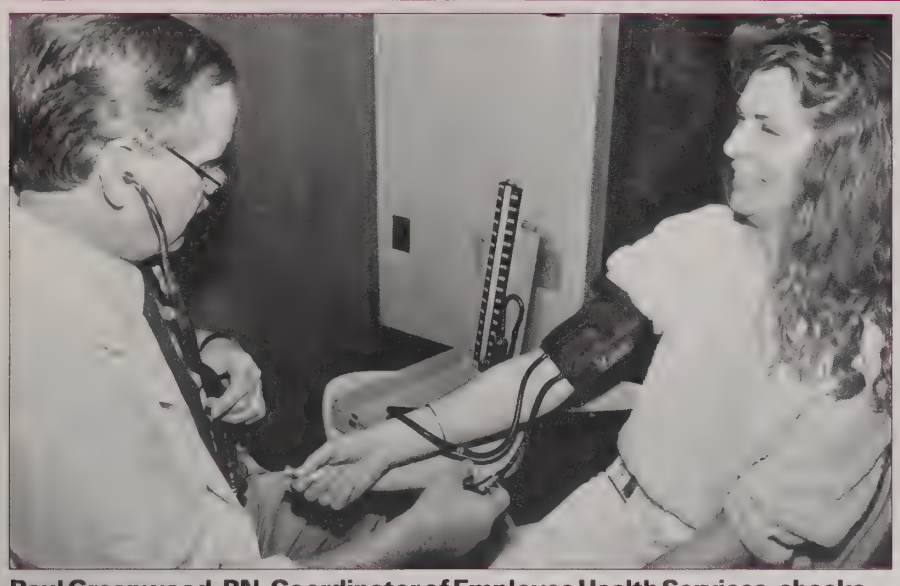

Paul Greenwood, RN, Coordinator of Employee Health Services, checks the blood pressure of a chuckling MGHer.

Lois Howry, RN, volunteered to assist Employee Health with blood tests during cholesterol screening last month. Ms. Howry was one of the employees affected by the layoffs in March. She says she came back to help because she understands the hospital's fiscal problems and feels a loyalty to the MGH and the people who work here.

From left to right: Helen Doherty, Director of Dietetics, Dietician Susan Laramee, and Dietetic Intern Tracy Uriati help MGH employees sign up for cholesterol screening.

Recycle

from page 1

And recycling makes sense for other reasons as well. Residents of Massachusetts produce an estimated six million tons of solid waste each year. And by 1990 state officials estimate that 70-80 percent of the state's 167 landfills will close because they will have reached their limit. As our environment reaches its capacity to absorb the waste we produce, we must realize that out of sight really isn't out of mind.

Mrs. Albanese, Mr. Banchiere, and Mr. Newell intend to plant a reminder of just how far one sheet of paper can go. In recognition of the impact recycling programs have on the environment and to give MGH employees a sense of their accomplishment and contribution, the Recycling Committee hopes to plant a sapling on the MGH campus after

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Clarification of Medical Records Move

Only the Active File Room and the Correspondence and Patient Index sections of the Medical Records Department have relocated to the Somerville facility. The Active File Room contains approximately 800,000 medical records which have been active for patient care, research, or administrative purposes since June 1984. The Correspondence Reception Desk, Dictation-Transcription, Processing-Incomplete Records, the Record Control Center, and the Research-Physician's Reading Room remain in the Clinics Basement. To request medical records days, evenings, or weekends call ext. 2470.

Radio Days: a Vincent Club spring revue

The Vincent Club presents "On the Air!," an original musical revue which chronicles the age of radio from its beginnings in the 1920s to the present. The show opens on Thursday May 4 and will run through May 6 at the New England Life Hall. Performances on Friday and Saturday nights are at 8:00 pm and a Saturday matinee begins at 2:00 pm. Tickets for the show range from $10 - $20.

The opening dinner will be held at the Copley Plaza Hotel on Thursday, May 4, at 6:00 pm. The cost for the dinner is $40 per person. There will be a Dress Circle at $85 per person which includes dinner, wine, and preferred seating.

A Saturday-night supper buffet will be held in the lobby of 500 Bolyston (across from New England Life Hall). The buffet supper and a la carte bar is $35 per person. Dress Circle for Saturday night is $80 per person and includes the buffet supper, preferred seating, and parking.

Funds raised by the show along with those raised by the more than 300-page program made possible by over 500 advertisers, benefit the Vincent Memorial Hospital, the gynecological service of the MGH.

Reservations for these dinners are limited. Call the Vincent Club at 523-3900 or the Vincent Box Office at 536-9606 for tickets. Master Charge and Visa accepted.

What's happening

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Volunteers Needed

The Reproductive Endocrine Unit has an immediate need for healthy women ages 18-40 years, with regular menstrual cycles and taking no medications, to participate in ongoing research studies. Compensation is available, and there are opportunities for repeat studies. Call Helen at ext. 5387 for details.

Spaulding lecture to address challenges of the 90s

The Spaulding Rehabilitation Hospital will hold its 6th Annual Josiah A. Spaulding Lecture on May 2 at 6 pm. The featured speaker is Dr. William B. Schwartz, Professor of Medicine at Tufts University Medical School. In his presentation, "Who Will Make the Tough Decisions?," Dr. Schwartz will address medical and economic challenges of the 1990s and beyond. For more information and to RSVP, contact Ann Kramer at 720-6645.

May is Better Hearing and Speech Month

In recognition of Better Hearing and Speech Month, the Speech-Language Pathology Department will offer free voice, speech, and hearing screenings for visitors and MGH employees. Researchers estimate that up to 24 million people in the United States have a hearing, speech, or language impairment; yet most people with communication disorders can be helped.

The Speech-Language Pathology Department employs 16 speech-language pathologists who are educated and trained to diagnose and treat patients with communicative disorders. Clinicians are specially trained in the areas of adult and pediatric neurological communicative disorders which may result from stroke, head injury, neurologic disease, lack of air, developmental delay, and tumors of the head and neck. Speech-language pathologists will be available at a booth in the WACC to answer your questions and provide information. Screenings will be conducted at the following locations:

WACC Lobby	May 8,10,15,17 11:30 - 1:30 pm
CMHC (2nd floor)	May 5 noon - 1:00 pm
BHHC (2nd floor)	May 8 2:00 - 3:00 pm May 10 noon - 1:00 pm
RHC (1st floor)	May 8 noon - 1:00 pm

Run for the fun of it

The Second Annual MGH Nurses' 10K Fun Run (or walk) is scheduled for Saturday May 6 at 8:00 am. Registration forms will be posted at all elevators. There is no fee, but T-shirts will be available for $6.00. Grab your running shoes and join the fun. The run begins at the Bulfinch stairs.

National Secretaries Week

This is the week to show our appreciation for the secretaries who keep the wheels turning in MGH departments. Training and Development hosted a variety of programs in recognition of National Secretaries Week including a forum at which executive secretaries shared their secrets for success.

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In general
from page 2

cations for Shock Wave Lithotripsy and Chemical Dissolution Techniques," and Dr. Hahn's was "Ringed Hepatic Lesions in MR Imaging: A Bestiary." Dr. Brink is a Clinical Fellow in Radiology at Harvard Medical School. Dr. Hahn is Assistant Professor of Radiology at Harvard Medical School.

What's happening
from page 3

National Medical Laboratory Week

The MGH celebrated National Medical Laboratory Week earlier this month with a booth in the WACC that featured displays on Blood Banking, Chemistry, Microbiology, Cytopathology, and the education and preparation required for Medical Technology.

Thanks to everyone who contributed to the success of National Laboratory Week and to our laboratory staff for their continued efforts toward providing quality health care.

Longwood Symphony Orchestra ends a season with international flair

The Longwood Symphony Orchestra ends its season with a concert at Jordan Hall at the New England Conservatory on May 14 at 8:00 pm. The 80-member orchestra is composed of doctors, nurses, technologists, medical students, and other health care professionals from the MGH, the MEEI, hospitals in the Longwood Medical Area, and Harvard's schools of medicine, dental medicine, and public health.

Six MGH staffers play for the orchestra, including Orthopedist Dr. Mark Gebhardt; Pediatrician Dr. Lisa Wong; Dr. Edward Maytin, Resident in Dermatology; Dr. Edward Cheng, Resident in Orthopaedics; Dr. Helen Mrose, Resident in Radiology; and Dr. Paul Wood, a Resident in Psychiatry.

They will perform Borodin's "In the Steppes of Central Asia," Dvorak's Cello Concerto in B minor, and a Bartok concerto for orchestra. For ticket information, call 734-7512 or the Jordan Hall Box Office at 536-2412.

The MGH HOTLINE is published twice monthly by the MGH News Office.

William E. Walch, *Vice President for Resource Development and Public Affairs*

Martin S. Bander, *Director of News and Public Affairs*

Kennetha J. Bigham, *Editor*

Doris G. Schrekengaust, *Copy Editor*

Recycle
from page 3

the program is well underway.

One ton of paper equals 17 trees. The recycling tree will be a daily reminder that a little creativity on our part can help keep our forests standing. The recycling tree will also remind us that our waste paper will find its way into products made from salvaged paper such as greeting cards, manila folders, cereal boxes, and cardboard cartons, instead of ending up in our waterways, landfills, and air.

"We hope to plant the recycling tree to recognize the success of the program, and the greatly appreciated efforts of MGH employees," said Mrs. Albanese. "The tree will also symbolize the money we will save, the money we will earn, and the impact we can have on the environment."

Over the next weeks the Recycling Committee will visit departments to educate employees on the program and to help them establish the collection procedures most appropriate for each area. For more information call Mrs. Albanese at ext. 5800, Mr. Banchiere at ext. 2445, or Mr. Newell at ext. 8227.

What to recycle (white paper only)

typing paper
writing paper
photocopy (*xerographic*) paper
letterhead
memos
scratch paper
index cards
tabulating cards
envelopes
(*without plastic windows*)
computer printout paper

Do not include

any glossy or coated paper
newspapers
magazines
lunch bags
napkins
non-paper items such as bottles and cans
gummed labels
file folders with labels attached cardboard
carbon and other sensitized papers
blueprint paper
film or photographs
scotch tape or glue
metal objects or spiral binders
fasteners
books
colored paper
wax paper
other waste like smoking materials or coffee cups

Retirements

Best wishes to the following employees who have retired:

January, 1989

Leonard Maggiotta,
Plumbing Shop, 46 years
Elisabeth White,
Cortical Function Lab, 41 years
Kathleen Isler,
Environmental Service, 25 years
Mattie Jones, Nursing, 25 years
Concezio Palmieri,
Environmental Service, 20 years
Edna Barry,
Anesthesia Research, 14 years
Adolphus Dunbar, Security, 14 years
Eleanor Darman,
Social Service, 11 years
Olga Best, Dietetics, 10 years
Marjorie Bowman,
Patient Accounts, 10 years

February, 1989

Jennie LaPia, Hematology, 24 years
Concetta Aufiero,
Clinical Administration, 20 years
Blanca Rosales,
Linen Control, 20 years
Rosemarie Amici,
Ambulatory Care, 11 years
Elizabeth Gordon,
Revere Health Center, 11 years

March, 1989

Henry Jansen,
Environmental Service, 16 years
Lovely Templeton,
Pharmacy, 15 years
Emma Teneriello,
Infectious Disease, 12 years
Doris Wright,
Building Services, 12 year
Edith Burnett,
Linen Control, 11 years

Lovely Templeton and Pharmacy Director Harold DeMonaco toasted fond memories at Ms. Templeton's retirement party last month. Ms. Templeton has been at the MGH for 15 years and will be remembered for her humor and warmth.

Rosemary Jaromin, Lab Supervisor in Hematology, gave Jennie LaPia (right), a proper send-off at her retirement party. Ms. LaPia has worked in Hematology for 24 years and retired in February.

Ms. Jaromin made Ms. LaPia a cake decorated with a detailed four-color painting of the Bulfinch Building. She used powdered food coloring mixed with cocoa butter to make the drawing, which featured a pale blue sky, the building done in greys and browns, leafy green trees, and deep blue water. The cake was completely edible, and delicious.

MGH HOTLINE

18 May 1989

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Bartlett 9, Extension 2206

Terri McEleney of the Museum of Science helps a young MGH patient discover the wonder of a baby chick.

Museum volunteers help children discover science

In a dimly lit room at the end of a hallway on Burnham 5, children gathered. They wandered in, attached to IVs and in wheelchairs pushed by parents. They knew. It was Thursday night and those people were here with all of their stuff.

A small three-year-old peeked inside a box the visitor had brought. His head jerked up abruptly, and he ran to the other side of the room giggling. "There's something in there!," he whispered.

Indeed, from inside that plastic box, many beady eyes peered back at the boy. And when he gathered his courage to look again, it seemed the beady eyes chirped a hearty hello.

Inside the box were fuzzy yellow chicks, just days old. And the visitors who provided such delights were volunteers who come two Thursdays each month to bring a little bit of the Museum of Science to the Children's Service at the MGH.

Rosemary Knight, Coordinator of the Discovery Room at the museum, calls her newest venture, Discovery Room on Wheels. The Discovery Room is a place where children who come to the museum can get a hands-on introduction to science, and have fun in the process. Staffed mostly by volunteers, it features exhibits about dinosaurs, snakes, and static electricity for example.

Visitors to the Discovery Room at the museum can make rubbings of dinosaurs, watch a multicolored image of their hand take shape on a heat sensitive crystal, or construct a working telephone out of paper cups, string, and paper clips.

Discovery Room volunteers come to the hospital twice a month with exhibits, games, and all sorts

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Chelsea Health Center gives the Fire Department a shot in the arm

Eileen McAdams, RN, Head Nurse in the ER at the MGH Chelsea Health Center, is helping to protect Chelsea firefighters. Here she prepares to vaccinate Capt. Robert Better against Hepatitis. Photo courtesy of The Boston Herald.

Health care workers at The Chelsea Memorial Health Center (CMHC) are helping to protect Chelsea firefighters and police officers from a dangerous occupational hazard — Hepatitis B.

The health center last month kicked off an innovative program to provide inoculations against Hepatitis B, and education about Universal Precautions to members of the Chelsea Fire and Police departments. Universal Precautions are the new Centers for Disease Control guidelines designed to protect health care and emergency workers against infectious diseases such as hepatitis and Acquired Immune Deficiency Syndrome (AIDS).

Sixty-four firefighters from Chelsea were the first to participate in the program. The immunization, provided on-site at the firehouse, consists of a series of three injections over a period of six months.

Hepatitis B is a chronic and potentially life threatening liver disease that is contracted by direct contact with a carrier's blood or other body fluids. The disease is often debilitating and can lead to liver cancer and cirrhosis of the liver.

Because of the nature of their work, police officers and firefighters are at a much greater risk of contracting the disease than the general population. In fact, a recent incident in which a firefighter was exposed to the virus was the impetus for the immunization program.

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The MGH has its own temp service

Your secretary or office assistant becomes ill, or takes a vacation, or must attend a three day conference. You panic, wondering who will run the office, and frantically begin calling temp services.

There are more than 50 temporary employment agencies in Boston. They all charge different rates and provide people with a wide range of skills, abilities, and interests. Which is the best deal? Which will provide the highest quality temp to fill your needs?

Trying to answer these questions can be time consuming, frustrating, and risky. But no more. Because now the MGH has its own temporary employment service, staffed by human resources professionals who can help find the right match for you.

Last month, Human Resources announced the opening of The Bulfinch Temporary Service. Coordinated by Mary French, the new service recruits temporary

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Rosemary Stravinsky, a temporary employee working in the Department of News and Public Affairs, always answers the phone with a smile.

Hepatitis

from page 1

A Chelsea woman who delivered a baby in an emergency vehicle on the way to the hospital later tested positive for antibodies to Hepatitis B. Chelsea Fire Chief Fred Resca called Chelsea Memorial Health Center, because he was concerned that the officer might have contracted the disease through cuts on his hand. Fortunately, the fireman tested negative for the disease, but the incident raised concern within the department about susceptibility to the disease and the possibility that infected emergency workers might transmit it to family members.

Hepatitis B is spread in much the same way as AIDS, yet emergency workers are five times more likely to acquire Hepatitis B than AIDS. And where the AIDS virus is fragile and easily destroyed, the Hepatitis B virus is so hearty that it can live in dried blood for many months.

"Hepatitis B is a very common occupational hazard for firefighters and police," pointed out Beth Beaumont, Nursing Director of the MGH Health Centers. "The real impact of this program is that there was a real possibility that some of them would have contracted Hepatitis B at some time during their employment. Through immunization, this has been prevented."

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In General

Investigators in the MGH Orthopaedics Service are recipients of two Kappa Delta Awards from the American Academy of Orthopedic Surgeons.

Dr. Stephen B. Trippel, an MGH orthopedist and Instructor in Orthopaedics at Harvard Medical School, received the Young Investigator's Award for his work on growth factor regulation of cartilage function.

Dr. Henry J. Mankin, Chief of Orthopaedics at the MGH and Edith M. Ashley Professor of Orthopaedic Surgery at Harvard Medical School, shared the Elizabeth Winston Lanier Award with two other U.S. physicians and two Canadian investigators for research on skeletal tumors.

The Kappa Delta awards are given for basic research in orthopedics and are among the highest research awards attainable in the field.

Lin Steiner, PT, has been named to a dual clinical appointment between the Physical Therapy Department and the Orthopaedic Service of the new MGH Physical Therapy Associates.

Dr. Howard Baden, a dermatologist at the MGH, was installed as President of the Society for Investigative Dermatology at a tri-continent meeting of dermatologic societies in Washington, D.C..

The meeting brought together the American body with the European Society for Dermatologic Research and the Japanese Society for Investigative Dermatology.

Dr. Baden, who was the editor of the society's *Journal of Investigative Dermatology* from 1982 to 1987, has served as the society's President-elect during the past year. He is also Professor of Dermatology and Associate Chairman of the Department of Dermatology at Harvard Medical School.

Dr. Stephen Trippel

Dr. Barbara Berkman, an MGH social worker, recently moderated a panel at the Boston Museum of Science titled, *"Implant Technology: High Tech, High Hope, High Risk."* Dr. Berkman also presented an invitational paper entitled *Health Practice in the 21st Century* at the annual meeting of the Council on Social Work Education in March.

Dr. Deanna Pearlmutter, Director of Surgical and Psychiatric Nursing Services, testified before a Senate panel in favor of an amendment to the Massachusetts Nursing Practice Act. She also appeared on WNTN radio in Newton to discuss her work at Radcliffe College on *Women in the 21st Century*.

Recognizing MGH Volunteers

Last month, MGHers gathered in the Wellman Conference Room to honor volunteers who through their generosity and compassion help realize the MGH mission of providing quality patient care. This year, 1,005 volunteers have contributed more than 90,000 hours of service to the hospital.

In his keynote address, Dr. J. Robert Buchanan, MGH General Director, spoke of the importance of volunteers in light of the financial stress Massachusetts hospitals are facing. He said that because of the state's failed promise of funding for hospitals and a bleak outlook for increased federal funding of health and human services, MGH volunteers are crucial to the success of the hospital.

"I see in this room today and in what you do for this institution some hope for the MGH in the future," he said. "We will be increasingly dependent on the kinds of contributions that volunteers make. I really do feel that you are one of our most valuable resources."

W. Nicholas Thorndike, Chairman of the MGH Board of Trustees, presented the awards. Jesse Harding awards went to Joan DeGuglielmo and Katharine (Bunny) Baker for outstanding service.

Ms. DeGuglielmo serves in the MGH Chaplain's Office. As a Eucharistic Minister for the Catholic Chaplain, she distributes communion to patients. To pursue spiritual work, Ms. DeGuglielmo took an early retirement from Cambridge Hospital where she had worked for 31 years.

She has continued to work despite several minor strokes. My greatest reward," she said, "is to keep going and to bring some peace to patients who are terminally ill." Ms. DeGuglielmo has contributed more than 3,000 hours of service to the hospital.

Mrs. Baker has volunteered at the MGH as a member of the Ladies Visiting Committee, in the Patient Care Representative's Office, in the Emergency Department staffing the Family Liaison Desk, in the Gray Family Waiting Area, and at the Phillips House Reception Desk. Her relationship with the hospital has spanned 25 years.

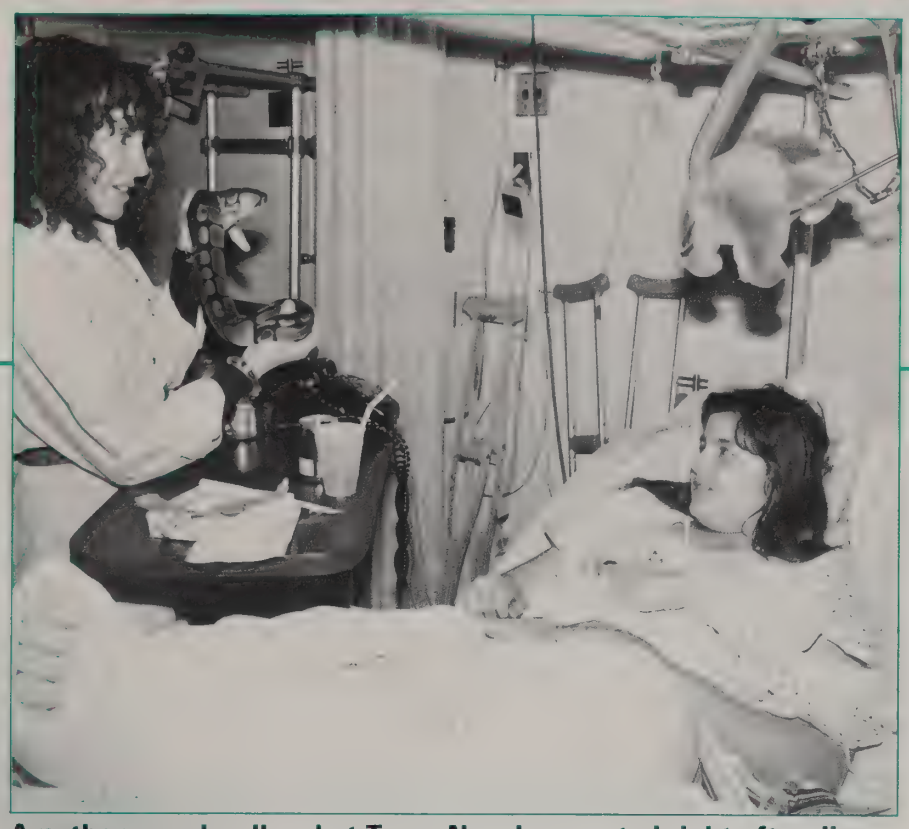
Mrs. Baker has witnessed many changes in health care, and she anticipates an expanding role for the volunteer. New technologies, she said, have decreased hospital stays, thus placing more emphasis on teaching patients to care for themselves after discharge. "And as the elderly population grows the idea of having a hand to hold is going to become more important," she said.

The Division of Research Affairs, directed by Dr. Ronald Lamont-Havers, received the Trustees Award for its work with student volunteers. MGH researchers welcomed 61 college students into their labs last year to work, learn, and observe.

Patricia Rowell, Director of the Volunteer Department, had received many requests from students wanting to volunteer in research labs at the MGH. However, placement of these volunteers was haphazard until last year when, with the help of Research Affairs, Ms. Rowell canvassed MGH researchers about their needs for volunteer assistance. The data allowed the Volunteer Department

continued on page 4

Cathy Woodman presents a bouquet of flowers to Jesse Harding awardee Joan DeGuglielmo (right).



A python was hardly what Tracy Novak expected right after dinner. Rosemary Knight, Coordinator of the Discovery Room at the Museum of Science, peaked the childrens' curiosity and dispelled misconceptions about snakes.

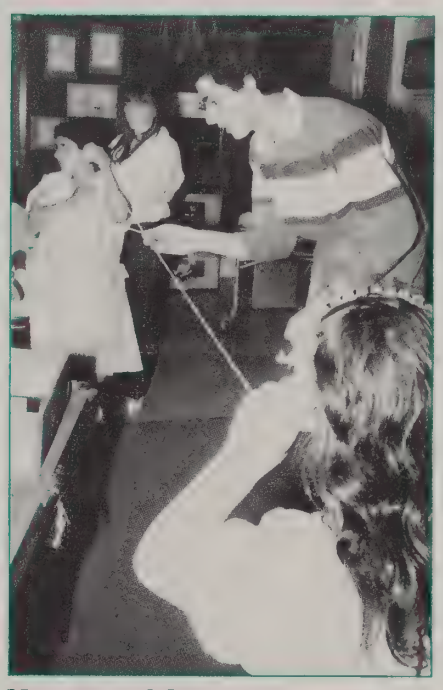
Ms. Knight helps a young patient make a drawing of a dinosaur.

Museum

from page 1

of examples of kid-sized science. Ms. Knight says that she started Discovery Room on Wheels in an effort to reach children who could not come to the museum. "What better place to start reaching out than our neighbors across the river," she said.

The purpose of the Discovery Room is to get children asking questions about science. Volunteers are trained to always answer a question with a question. Because the real payoff isn't the answer, but peaking a child's curiosity and teaching her how to think. "The purpose of the Discovery Room is not to teach kids science but to get the juices flowing," said Ms. Knight. "We want to get them thinking through the questions they ask. Our job is to lead the youngster to make a discovery."



Museum of Science volunteer Jayant Sharma tampers with the telephone line while Karen Doyon talks to her brother Michael.

And the volunteers know and practice what they preach. One volunteer who has been with the museum for two years is a graduate student in rocketry at MIT. Other volunteers include a computer engineer, and Dr. Martha Gray, an MGH researcher and professor at MIT.

MGH children held baby chicks, as Ms. Knight talked about what chicks eat and how their fuzz turns to feathers. The children made telephones from paper cups. They were astonished when they were able to talk to each other across the expanse of the play room, and they listened attentively as volunteers explained how sound waves travel.

A young boy with casts on both arms placed his face against a heat sensitive crystal and laughed at the red, blue, and green imprint it made. And a baby python became the center of attention when Ms. Knight held him up to the tentative touches of parents and children as she explained how snakes shed their skin. Ms. Knight feels that it is especially important to involve parents, and she held her adult audience enthralled as well that night. "We want to get parents working with their children to look at their world in different ways," she said.

As the museum volunteers packed their things, there was only mild disappointment. The volunteers had left fun things behind like the paper helicopters they had helped the children make and animal stickers. They promised to return in two weeks— on another Thursday night, to the dimly lit room where the children will gather.

Temps

from page 1

secretaries, medical transcriptionists, office assistants, medical records personnel, receptionists, and summer employees for placement in MGH departments. Future plans will include placement of service and health professionals.

The service, which has already placed 24 temps, provides skilled office support personnel to fill positions created by vacations, illness, leaves of absence, or special projects.

Gunter Hufner was the first employee to sign on with The Bulfinch Temps. As a temp for another agency, he had already worked in several MGH departments, including Communications, Resources and Development, and Buildings and Grounds. Mr. Hufner felt that working for The Bulfinch Temporary Service would provide an entree to a regular status position at the MGH. He was right and now is Assistant to the Coordinator of The Bulfinch Temps.
"I wanted to work in a hospital environment," he said of his reason for coming to the MGH, "and to be part of one of the most prestigious hospitals in the country."

Ms. French says that many people start temping at the MGH because they desire a regular position. For such an employee, temping is an excellent way to become familiar with the hospital environment.

"The Bulfinch Temporary Service gives the employee a chance to look at the hospital," said Ms. French. "And it gives the department a chance to have a temporary employee with a better understanding of the hospital. This will provide for a more positive relationship between the temp and the department."

The in-house temp agency will serve the financial needs of the hospital as well. In fact, tight budget constraints provided the opportunity to begin this service.

Temporary agencies charge companies a significant service fee over what they actually pay the temporary employee. The Bulfinch Temporary Service pays competitive rates to temps, but by avoiding the outside-agency markups can substantially cut the rates MGH depart-

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Heartbreak Hill didn't hinder these MGHers

MGHers joined Abebe MeKonnen, Ingrid Kristiansen and Joan Benoit Samuelson on Patriots Day to trek a fast 26 plus miles and make the Boston Marathon a part of their own personal history.

A group of patients from the MGH Cardiovascular Health Center (CHC) ran the full course. Christie Kuo, RN, and physical therapist Mary Devoe ran the entire 26 miles with the group.

This was a first for Dr. Howard Goodman, Chief of Molecular Biology at the MGH and Professor of Genetics at Harvard Medical School, who ran with the CHC group. After the event, Dr. Goodman celebrated with an ice cream sundae and then hopped a plane to New York for a meeting. "Aside from being sore for a few days after the run," he said, "I did fine." Dr. Goodman added that he's considering running the 1990 marathon.

Boston's 93rd marathon was a first for CHC patient Alex Avdees as well. It was the third time out for Bill McCabe, Param Singh, and Nelson LeClair. And Charles Henry ran his fourth marathon that day.

The group trained together for almost four months before the marathon. And each runner ran an average of 60 miles per week to get into shape. All of the patients underwent stress tests before running and had frequent pulse checks during the run. Ms. Kuo reports that they came through with flying colors.

Even so, the CHC emphasizes that for heart patients to become cardiovascularly fit, there is no need

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What's happening

Walk for AIDS

Please join other MGH employees on June 4 for a pledge walk to benefit AIDS care and research. This fourth annual pledge walk is the largest fundraising event for AIDS services held in New England.

Further information, including sign-up cards and pledge sheets, will be available at a booth in the WACC Lobby from May 18 through June 2, 11:30 am - 1:00 pm.

MGH walkers will meet in front of the WACC Lobby at 8:30 am on June 4 and walk to the Boston Common to join other participants. The MGH will provide free T-shirts for employees who participate in the walk. Please join us to show your support for AIDS care and research.

Chaplain interns graduate

Fifteen Chaplain Interns have graduated from the Clinical Pastoral Education (CPE) course at the MGH. The course is an accredited program administered by the MGH Department of Pastoral Care and Education, Director the Rev. Phillip M. King, PhD.

Marathon

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to run anything near marathon distances. Indeed they try to discourage the patients from competing in the BAA Marathon but accompany them for safety sake.

MGH employees who reported their times to The Hotline were:

Dr. Scott B. Phillips, Dermatology, 2:56:06, (placed 741st in a field of more than 5,000 men who competed)
Dr. Scott Rivkees, Childrens Service, 3:19
Dr. Ward Cromer, BHHC, 3:29
Dr. Peter Rutledge, Surgery, 3:36
Dr. Bruce Kalow, Childrens Service, 3:49
Dr. Robert Still, Surgery, 4:15

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Temps

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ments must pay for temporary employees.

And more important, the MGH service can better ensure the quality of temporary employees. Ms. French says that each potential temp is carefully screened by MGH human resources professionals who know the needs of the hospital. And as a result of a mailing to former employees, the service has attracted many seasoned MGHers. For instance, a woman who worked at the hospital as an executive secretary for five years, left to attend law school. However, she needed a summer job and signed up with The Bulfinch Temps. Retired MGH employees have returned to temp as well. "It's an opportunity for valued employees to come in on a temporary basis when it serves their needs," said Mr. Hufner.

For more information about The Bulfinch Temporary Service, contact Mary French or Gunter Hufner at 726-5858.

The Bulfinch Temporary Service held an opening reception early this month. From left to right are Mary French, Coordinator of the service; Klara Sztucinski, Manager of Training and Development; Laura Kacoyanis, Training and Development Department Secretary; and Gunter Hufner, the first temp to sign on with the service.

Hepatitis

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The program is a culmination of the joint effort of the Chelsea Fire Department, Chelsea Health Department, and the Chelsea Memorial Health Center. Program coordinators worked with managed care systems such as the Bay State and Harvard Community health plans to obtain coverage for the immunizations. John Brennan, Mayor of Chelsea, provided funding for firefighters who were not covered by insurance, and the MGH Pharmacy provided the vaccine at cost. The program will continue over the next months with inoculations of police officers, education on Hepatitis B and AIDS, and CPR instruction.

Volunteers

from page 2

to generate a mailing to area colleges announcing placements in research settings.

"I think everybody feels good when we are able to help a student to clarify a career decision and get valuable experience," said Ms. Rowell.

In accepting the Trustees Award with Dr. Lamont-Havers, Dr. Stephen Trippel, an MGH orthopedist, pointed to his work as a volunteer in a hospital research lab as the experience which stirred his interest in pursuing medical research as a career. Dr. Trippel earlier this year received the Young Investigator's Award from the American Academy of Orthopaedic Surgeons.

Cathy Woodman, Coordinator of the Day Program, was recognized for exceptional service. Ms. Woodman has worked in the MGH Volunteer Department for seven years and has been instrumental in making the hospital more accessible to volunteers.

W. Nicholas Thorndike, Chairman of the MGH Board of Trustees, addressed a full house at the volunteer recognition ceremonies last month.

MGH Picture Awards recognize volunteers for outstanding service to the hospital. Recipients were:

Caroline Blake, Bob Cavicchi, Lois Cheston, Marc Civitarese, Virginia Dec, Fred Hennigan, Christopher Hurd, Irene Janson, Fran Johnson, Virginia Kaneb, Rosamond Leavitt, Susan Morris, Madeline Pini, Marie Rotti, and Phil Talbot.

The MGH Honor Roll recognizes volunteers for their dedication and lengths of service. Recipients were:

25,000 hours
Judy Paige

23,000 hours
Edith Palmer

12,000 hours
Connie Thibodeau

11,000 hours
Charles Meyers, and Betty Paul

10,000 hours
Frannie Aldrich, Sally Taylor, and Phyllis Welch

8,000 hours
John Barry, Kathryn Mootz, and Charles Snelling

7,000 hours
Janet Chaffee, Maurice Greenbaum, Ellie Hackett, and Natalie Metcalf

6,000 hours
Ida Cerbone

5,000 hours
Ann Fournier, and Rose Zizzo

4,000 hours
Lucy Burr, Alice Corcoran, Florence Hurley, Joy Kimball, Mary Murphy

3,000 hours
Barbara Adams, Mary Avery, Bunny Baker, Madelyn Carey, Helen Camusi, Joan DeGuglielmo, Jack DiBona, Arthur Hickey, Dory Howard, Mim Huggard, Helen Jones, Rosemary Kerry, Millie LaJoie, Freddy LoBlundo, Paula O'Keefe, Mary Page, Russell Paul, Amy Ringer, Mary Rowe, Jean Swaim

The addition of a new evening coordinator, Jean Wheelwright, has enhanced the success of the MGH Volunteer Department. Ms. Wheelwright will be available to support volunteers until 7:00 pm Monday through Thursday and on Friday until 5:00 pm. As well, the new Interpreter Service, directed by Margarita Battle, continues to meet increasing demand. The service responded to more than 2,000 requests for language support last year.

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Bubbles

Just what the doctor ordered

Doctor Stubbs, a Big Apple Circus clown, visited the Children's Service last month. He performed a *nosectomy* (replacement of a person's nose with the nose of a clown). Here he tests a cl[illegible]s respiration by having him blow bubbles.

A Revolution in Education
The MGH—Timilty Partnership

American industry no longer needs workers trained in a plethora of facts. That system, long past its usefulness, is better suited to preparation for game shows like Jeopardy.

To compete in the international marketplace, U.S. companies need workers who, with an understanding of relevant technologies, can take a problem, gather the data to illuminate it, find creative solutions, make decisions, and institute change. *We need workers who can think.*

Yet we bemoan the "crisis in education" that makes the system a failure at producing them. We need a revolution in American education. And according to one MGH administrator, that revolution should prove the value of education by proving its use.

"We haven't had much of a revolution in education in this country since it was founded," said Stephen Kauffman, Assistant General Director of the MGH. "We teach in the abstract. You learn for the sake of learning without ever knowing what the applications are."

Stephen Kauffman, Assistant General Director (seated) and Thomas Marcussen discuss MGH externships for Timilty teachers. The two administrators hope to find w[illegible]s for Timilty faculty m[illegible]mbers to gain exposure to the hospital environment their students will use as a laboratory for learning next year.

The MGH has embarked upon a partnership with the Timilty Middle School in Roxbury to help teach inner-city youth the value of education by giving them real-life examples of what they study in school.

The emphasis on abstract learning is why many children are falling through the cracks. "Kids who do not have a tradition of education in their families have trouble connecting the academic subjects they are learning with what they might actually do in the real world," said Thomas Marcussen, an MGH administrator who is helping to coordinate the partnership. "This project will help to bridge the gap."

The revolution takes note of how Harvard teaches doctors

The disparity between abstract and concrete teaching methods isn't

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Don't miss the TOWN MEETING on Tuesday, June 13 at 4:00 pm under the Bulfinch tent!

Spend a Day With a Nurse program highlights meaning of nursing

What has nursing at the MGH come to mean in the hands of about 1700 men and women who represent the profession here? From the OR nurse to the nurse researcher, the IV nurse, or the nurse working with burn patients, they all bring special meaning to the science of nursing care.

Last month some MGH employees got an inside look at the nursing profession, thanks to the Third Annual Spend A Day With a Nurse program. Some definitions were born as a result of these employees' experiences.

Commitment. Competence. Control amidst seeming chaos.

The Cardiac Surgical Step-Down Unit on Warren/Baker 12 houses 42 patients and is staffed by 11 nurses during the day shift. It is a T-shaped unit with walls lined with monitors, gurneys, wheelchairs, machines, and carts.

The nurses station sits at the center of the T and is the focal point of activity on the unit. People come together here to discuss patients, review charts, examine diagnostic tests, take notes, and make decisions. To the observer, the scene may at times seem chaotic, but these people work like individual elements of one organism.

Teamwork. Exploring the limits of human adaptability, versatility, and wherewithal. Compassion.

Eileen Jefferson, RN, rarely stopped working during her eight-hour shift. She didn't have time for lunch and only sat down twice, to enter a note on a patient's chart. The MGH nurse had four cardiac patients to care for on Warren/Baker 12.

Assisted by Laurie Biel, a nurse from the Transplant Unit who sought to gain experience caring for cardiac surgical patients, Ms. Jefferson frequently checked the blood pressure, temperature, and pulse of her patients. She helped them with personal hygiene and changed their bandages.

The patients had just come from the Surgical Intensive Care Unit where they were taken after cardiac surgery. They needed constant and attentive care. She made sure that potassium levels were normal. And if they weren't, she administered potassium through an IV tube.

She never stopped, but she was never alone. As the need arose, other nurses would help. A new admission was brought in, a 220-pound man. From around the floor, three nurses suddenly were at Ms. Jefferson's side to help her move him.

Standing on top of the gurney, the four of them grasped the sheet under him and in perfect unison lifted on the count of four, and swung him into bed by the count of six. Monitors were attached to appropriate places, the bed was straightened, and within five minutes of arriving on the unit, the patient was comfortable and joking with the four nurses.

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Eileen Jefferson, RN, checks Rita Hoskinson's blood pressure.

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Small town MGH page 4

What's happening

Great jewelry at great prices

A 14-Karat gold and silver jewelry bonanza, sponsored by the Ladies Visiting Committee, will be held on Thursday and Friday, June 15-16, in the WACC Lobby. Proceeds from the sale will benefit the hospital..

Celebrating secretaries

Training and Development recognized Secretaries Week with a variety of workshops. At a wardrobe seminar hosted by Cas[illegible] Corner, MGH employees learned how to dress for success, on a budget. Here Laura Kacoyanis, of Training and Development, presents the door prize (a gift certificate for Ca[illegible] Corner) to an MGH employee.

Other events included an executive secretaries forum, a seminar on strategies for career advancement, and a workshop that focused on the secretary-manager team.

Education

from page 1

the sole problem of secondary school educators. "We have a similar problem training doctors in medical school," said Mr. Kauffman. "The students learn a lot of facts but they don't know how to apply them to the patient. They know all about physiology, biochemistry, and body mechanics. But they don't yet know how to take someone's symptoms and convert that picture into a diagnosis. What they haven't learned is how to use education in the decision-making process."

To address this problem, Harvard Medical School in 1985 embarked upon an experiment in concrete learning. "The Problem Based Educational Model at Harvard uses the case method and clinical visits to integrate almost immediately students' academic experience with their clinical experience," said Mr. Marcussen.

The MGH role

For the past year, MGH staff members have worked with students, teachers, and administrators from the Timilty to find ways to bring the work environment into the classroom. MGHers helped students working on science projects focus their interests, develop questions, and find an application of the concept they wished to study.

A student who wanted to study bones in the foot, for instance, went to the Orthopaedics Service where a technician fitted her with a fiberglass cast and discussed how bones are set. The Cardiovascular Health Center, the EEG Lab, Infection Control, the Alzheimer Clinic, the MEEI, Shriners Burns Institute, and Pediatric Hematology/Oncology also assisted students with projects.

And employees from Staff Development spent hours at the Boston Public Library helping students learn how to prepare research papers and write a bibliography. The result? Two students won awards for their projects in the school department's city-wide science fair.

Ken Columb, an MGH orthopedic technician, fits Timilty student Annette De La Cruz with a fiberglass walking cast.

The MGH laboratory

The MGH can provide a multitude of such experiences for students. "There is only one thing that we can't do at the Massachusetts General," said Mr. Kauffman, "and that's make water.

"We can make our own electricity, we can make our own buildings. From catering services to health care, to banking, engineering, journalism, or computer science, you name it, we do it somewhere in this setting."

But the MGH will do more than just provide a laboratory for a set of educational experiences. MGH staff members will teach teachers about new technologies. "One of the reasons teachers have trouble relating the principles they teach to the realities of the work setting is because the work setting has changed so much from when they went to school," said Mr. Kauffman.

Hospital personnel will work with teachers to help develop curricula. Indeed this is a unique aspect of the project. Most partnerships between schools and businesses involve financial assistance, internships, or enhancements like office equipment or ticket tickets for students. "We know how what they teach gets used in the workplace," said Mr. Kauffman. "The goal is to get an idea of what is going on in both places and to develop curricula that have applications to what people do in real life."

The Timilty — Education that works

The Timilty Middle School is one of a few success stories of the

continued on page 3

An MGH employee who has seen patient care from both sides of the fence says thanks

An employee who has worked at the MGH for 11 years tells how she has come to appreciate the hospital both as an employee and as a patient. Here is her letter of thanks:

I am an MGH employee in the Film Library on Gray 2. In March of 1988, I was a patient at the MGH and had several arterial reconstructive operations and an eventual above-the-knee amputation.

I had wonderful surgeons, Dr. David Brewster and Dr. Jonathan Woodson (now at University Hospital). I knew both of them through my job at the Film Library, and they were very caring.

The care and support from the nurses on Baker 10 and Bigelow 13 was just wonderful. They were with me through my ordeal and all the tears. They listened to me. They held me when I cried. They were there when I needed them.

A few of them I never will forget. On Baker 10 was Babs (Barbara Curran), 3-11 shift. She

Lorraine Nichols

always had a smile, and time to talk. On Bigelow 13, there were Kathy Hazellett, Julie Sullivan, and Kassie Riley, who held me when I found out I had to lose my leg. I just want to thank them for being there and for all the support.

And I can't forget the nurses in the Recovery Room. I was there almost every Friday, four weeks in a row. They would see me coming in and say, "Oh, not you again." They were excellent. Everyone I met was so caring and gave of themselves. It meant a lot to me.

I left the MGH to go to the Spaulding Rehabilitation Hospital on April 19th. I cried upon leaving. Julie, one of the nurses from Bigelow, was there holding me, telling me everything would be alright. But I arrived at Spaulding still crying. I was told I would be there for five weeks.

I learned to walk on one leg with a walker, and on my seventh day I received my temporary prosthesis. Each step I took was terrifying, but it felt so good to be standing up again. I met a lot of wonderful people, also with their legs amputated. We all knew what each one was feeling. It was quite an experience.

On May 9, 1988, I left Spaulding. My five weeks turned out to be only 20 days. It was hard work but the therapists, Linda Wobeskya, Michelle Kerr, and Anna Goleniowski were excellent.

I have been really scared. There are so many things that you can't do at first. It does upset you very much and you just say, "I can't." But the next thing you know you are doing it, standing and walking. So you do make it, and I did.

I just want to thank everyone for all the support you have given me. And I would like to thank all the people I work with in Radiology for their flowers, cards, love, and support. They have made a lot of difference in my life.

Now for the best part. I went back to work February 6, 1989, three days a week to start. I've come a long way and still have more to go. Thanks to all of you.

Lorraine Nichols

Spend a day

from page 1

Curious. Mentoring to each other, their colleagues, and to patients. Smart.

In the Neuro ICU where Debra Wing, RN, worked with visitor Marie Giorgetti, PT, from the Physical Therapy Department, some of the most sophisticated and sensitive care is given to patients who walk a fine line between recovery and death or disability.

That day Ms. Wing focused on one patient. "This patient had an intracranial pressure bulb inserted in his brain," remembered Ms. Giorgetti, "an arterial line for measuring blood pressure and drawing blood gases, a temperature monitor, and a ventilator. Ms. Wing's knowledge base was absolutely incredible. I was amazed at the complex information she had to understand, the difficult decisions she had to make, and the amount of autonomy she had that is critical to patients in terms of life and death situations."

Ms. Giorgetti and Ms. Wing came to the experience with a purpose. They sought to learn from each other how their respective disciplines could be brought to bear on the problems of treating patients suffering head trauma.

"Physical therapists usually don't get in to see these patients this early," noted Ms. Wing, "because the least amount of stimulation can cause posturing [reflexive rigidity of the arms and legs that indicates a potential rise in intracranial pressure].

For this patient, in fact, even bathing him was too risky. He had to be handled with extreme care. "The patient had problems with intracranial pressure," noted Ms. Wing. "I had to manage when to give him medications, when to suction, when to turn the patient, while trying to decide which was most important to do. It's a little game you play. Like walking a tight rope between balanced care and not treating the patient too aggressively."

Comradery. Cooperation. Respect for themselves, their colleagues, and for the recipients of their care. Excellence.

An older woman Ms. Jefferson cared for talked of wanting her hair washed. But she understood how busy Ms. Jefferson was, already stretched to the limits of what one person can do in eight or ten hours.

Patricia Polgar, RN, (left) discusses patient care with visitor Jennifer Parks. Ms. Parks, an MGH lawyer, participated in last month's Spend a Day With a Nurse program.

But when Ms. Jefferson returned from picking up a patient at the Cardiac Catheterization Lab, Warren/Baker 12 nurse Kristen Schamberger had washed the patient's hair. The two nurses smiled at each other in mutual respect and appreciation.

Caring.

On a medical floor in the Bigelow building, Patricia Polgar, RN, cared for her patients and discussed her profession with visitor Jennifer Parks of the Legal Office. Ms. Polgar administered medications and monitored vital signs of patients. She got a patient onto a stretcher to be wheeled to another part of the hospital for tests. She attended a Medical Practice Committee meeting. And then she went to a wedding.

The groom was a 38-year-old man who had landed in a hospital bed just weeks before his wedding. The nurses on Bigelow 6 hung streamers and provided recorded music and refreshments. Aileen Castillo of Environmental Services made a cake. The couple's priest officiated. And the bride and groom said, "I do."

Nursing.

Leslie Warner who works as an Executive Office Assistant in the Medical Nursing Office summed up the value of the Spend a Day program in her comments about the day she spent with Emily Medford, RN, on Phillips House 2:

"Some things I knew intellectually about nursing and could have told other people about, like how hard they work. But it's different experiencing it and knowing it firsthand.

"When I think of how hard they work, I now know it in my body. I now know first-hand how complex it is to do the job well. You need empathy and warmth. You need physical dexterity and strength. You need the clinical technical knowledge that has to be updated constantly. And you need a whole body of expert knowledge like how to care for cardiac patients. I wanted to learn more about what nurses do. I learned how fast paced it is and how satisfying it can be to make a difference."

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Education

from page 2

Boston School System. In 1986, Dr. Laval Wilson, Boston School Superintendent, instituted Project Promise at the Timilty which stretched the school day by 90 minutes and included attendance on Saturdays.

Project Promise uses a team approach where teachers work together to emphasize concepts in each subject area. And writing is required in every discipline. In fact, Timilty students write 60 papers each year.

When the Timilty conducted mock Olympic games, students wrote about the history, culture, and politics of the countries that competed. In mathematics, they learned the metric system, computed averages and the complicated split times of the athletes.

They built and launched rockets in science class while working closely with their mathematics teacher on the complex computations of trajectory. In English they wrote about what it would be like to live in space, and in history, researched the progression of the U.S. space program.

The Timilty's successes have been a near zero drop-out rate, and reading and math scores that have risen from next to the lowest in the city to the second highest.

The Timilty was recently awarded a National Secondary Education Excellence Award by the U.S. Department of Education. Over 600 secondary schools around the nation were nominated for the award and 213 were finally recognized. Of the four Massachusetts schools that received awards, the Timilty was the only Boston School honored. And in the award's history, the Timilty is the only inner-city secondary school in New England to have been nominated or to have won.

"Learning is exciting for these youngsters," said Mary Grassa O'Neill, Principal at the Timilty. "We try to be enthusiastic about teaching and about learning, and to improve the academic performance and learning potential of every kid. This partnership with the MGH will help us help every child to succeed."

The MGH reaches out

Every department Mr. Marcussen has approached has enthusiastically sought ways to contribute. Next year Speech and Language Pathology will offer testing and treatment for learning and speech disabilities. It will also provide teacher training, consultation, and assistance with communication oriented curriculum.

"We also will speak to students about how communication disorders can be avoided by healthy behavior, how to interact with people who have language disorders, and how to improve their verbal effectiveness," said Julie Atwood Wheelden, Director of Speech-Language Pathology.

Dr. Michael Jellinek's group in Child Psychiatry will offer counseling and testing for children with emotional or behavioral difficulties as well as teacher training on issues such as child abuse, depression, divorce, family violence, and suicide. And the Department of Dietetics will help students interested in nutrition to develop science projects.

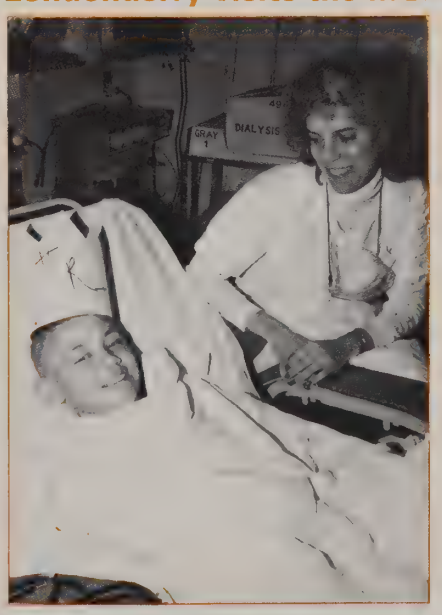
Helping shoulder the burden

As the federal government and the state struggle with commitments to education, businesses are accepting even more responsibility for finding solutions. On the same day that Timilty administrators were notified by the U.S. Department of Education that they had won the award of excellence, the Boston School Department notified them that five teachers would be laid off.

"Health care is one of Boston's major industries," said Mr. Marcussen. "We have a responsibility to the community to participate in trying to solve this crisis. And we will do that by looking at kids in the inner city as our resource and as our family."

As Mr. Kauffman sees his idea come to fruition he recognizes a chance for the MGH to help make significant changes in the lives of young people. "One of the things we hope to do with the Timilty school is to show them that there are other people who care," he said, "and hopefully turn a sometimes grim outlook into one of promise for this city and its youth."

King James of Londonderry visits the MGH



After finding that Jimmy McCarthy had been voted King of the Prom at his high school in Londonderry, NH, nurses in the Dialysis Unit made him a crown and designated him *His Royal Highness King James of Londonderry*. Nyla Shellito, RN, offered (in jest) to accompany him to the prom. The 17-year-old respectfully declined, but by all accounts let her down gently.

Small Town MGH

"The employees of the Department of Dietetics — they are mostly fun," said ***Helen Doberty****, director of the department. "The days when the work has us going in a million directions, they not only get everything accomplished, but somehow we end up laughing and talking about nonsense even when our feet hurt, our bones are tired, and you cannot imagine having to be back here at 6:00 a[illegible] next morning."*

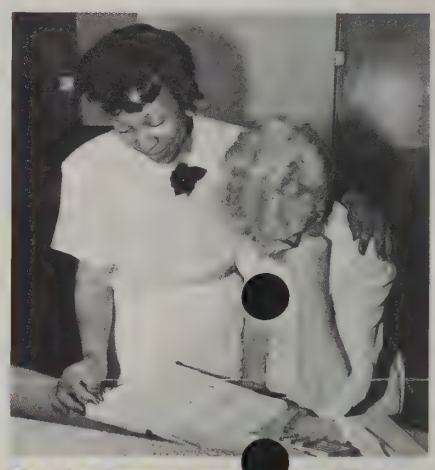
The MGH sometimes seems like a small town. We have town meetings, libraries, a deli, a beauty shop, newspapers, two banks, a post office, and our own television station. In this small town there are more than 10,000 employees and 1,000 different job classifications. They range from accountants to lawyers, nurses, plumbers, nutritionists, engineers, florists, volunteers, welders, architects, physicians, secretaries, and a veterinarian, to name a few.

Last month hospital administrators around the country celebrated National Hospital Week by recognizing the services their employees provide and how important they are to patient care. This essay of photographs (the first of two parts) represents some of the employees who make small town MGH the best place to come if you are ill.

The quotes were gathered by Employee Relations. We did not include every department at the hospital because of space limitations and because some departments did not respond to the survey. This is meant only to be a small representation.

"Admitting Department staff are smart, resourceful, resilient, independent, irreverent, and adaptable," commented ***Martha Byington, Director of Admitting.***

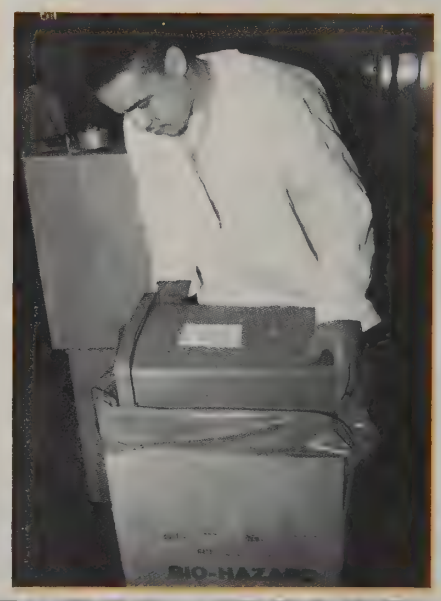
"Staff in the Speech-Language Pathology Department always rally under adversity, maintain a sense of humor, and see the light at the end of the tunnel. Despite cutbacks or increased patient census, and often both, they find solutions that meet current demands and consistent quality patient care." — ***Julie Atwood Wheelden, Director of the Speech-Language Pathology Department.***



On the front lines at the White Building Information Desk, there is still time for compassion among coworkers.

[Above] An MGH employee helps a patient with the lunch menu. [Right] A speech-language pathologist tests a child's hearing. The young girl raises her hand to indicate that she has heard the beep made by the audiometer.

Above, primary nursing rounds on White 3. Below, employees at the MGH Revere Health Center confer over a patient's chart.



*"The delivery of excellent medical care continues to be an ever-increasing team effort, year after year. All the people who make up this team—secretaries, nurses, technicians, doctors, and support staff—are the main reason why this institution continues to be one of the finest in the country."***— W. Gerald Austen, Chief of Surgery**

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MGH HOTLINE UPDATE

Memorial to Dr. Bernard M. Jacobson

Dr. Bernard M. Jacobson will be remembered by family, friends, and colleagues at a memorial service on Wednesday, June 21, from 1:30-2:30 pm in the Ether Dome. The MGH clinician, investigator, and teacher for 51 years died in March almost six years after his retirement. He was 84.

Dr. Jacobson was a pioneer researcher in the field of hematology and for many years he was considered virtually the hospital's sole expert in that area. From 1948 to 1959 he was head of the MGH Anemia Clinic, a unit he initiated.

Dr. Jacobson is warmly remembered as a mentor and clinical advisor by many physicians who served their residencies at the MGH. For decades he unstintingly used his own free time to provide informal, individual teaching sessions and clinical consulting for residents on questions concerning the blood problems of patients on the free-care wards.

"You had no hesitancy as an intern in calling him, meeting him in a corridor, and showing him a blood smear," recalled Dr. Morton Swartz, a house officer in the late 1940s and now Chief of the MGH Infectious Disease Unit. "He wasn't too busy — he was *always* busy, but he always had time."

Added Dr. Allan Sandler, an MGH physician who was a resident in the mid-1950s: "Because of his busy practice, these one-on-one consultations not uncommonly took place after dinner, usually any time between 8 pm and midnight.

"He'd ask you questions, pick your brain to get you thinking right; and then you'd get his advice — just a beautiful one-on-one Socratic type of teaching — unstintingly, unfailingly."

"There are some individuals who are esteemed for what they're willing to do in a situation in which the thanks aren't obvious, and it's that group of persons, in fact, that make an institution," said Dr. Swartz. "He's one of those people who helped to make this institution."

At Dr. Jacobson's retirement, the hospital established a lectureship in his honor.

He is survived by his widow, Rosalind; daughters Rachel Rosenblum of Lexington, Esther Tepfer of Eugene, Oregon, and Alice Neparstek, living in Israel; son Abram, of Los Alamos, N.M.; and ten grandchildren. For more information about the memorial service, call Rachel Rosenblum at 862-7036.

What's happening

Adult Stroke Support group at Spaulding

The Social Service Department at Spaulding Rehabilitation Hospital is sponsoring an outpatient young adult stroke support group for people aged 21-55 who are able to communicate moderately well. The eight-week program is designed to assist clients as they adjust to major life changes. The topics to be explored are: the loss of self esteem and independence, role changes within the family, and isolation.

Patients can take an active role in setting the agenda for the group. The group will meet Tuesday, 3:30 - 5:00 pm. To fulfill the needs of the group members, future scheduling can be adjusted. Please call 720-6500 to make a referral or for more information.

Discounts for MGH employees

A variety of discounts and coupons are available to MGH employees through the Personnel Records Department on Bulfinch 2.

Movie Tickets for General and Showcase cinemas are available on Monday and Friday only. Employees must present an MGH ID badge. Tickets are $3.50 each.

The City Book includes coupons that help you save on dining, shopping, and entertainment in Boston. City Books cost $.50.

Mass Buying Power offers information that can help you save 10 - 20% on new & used cars, bicycles, boats, computers, furniture, jewelry, stereo sets, video tape recorders, and much more.

With **B.J.'s Wholesale Club** membership you can shop for groceries, housewares, electronics, clothing, and more, all at low wholesale prices.

Steamship Authority Schedules and discount coupons are also available.

Sarni Cleaners provides a 10% discount on dry cleaning.

MGH HOTLINE

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Dr. J. Robert Buchanan, MGH General Director, held an attentive crowd at this month's Town Meeting.

Town Meeting dispels rumors of layoffs

On Tuesday, June 13, the battle on Beacon Hill over the state budget set the tone for the MGH Town Meeting. At stake in the legislature were millions of dollars owed to hospitals for treatment of Medicare and Medicaid patients. "We are one of the bankers for the state," said Dr. Buchanan referring to the fact that the Commonwealth has used monies owed to hospitals to cover other expenses.

State Medicaid payments owed to the MGH alone that are more than six months overdue total more than $8 million. The hospital must cover for the state's failure to pay by borrowing monies from MGH investments to meet operating expenses. The Catch-22 is that by using these funds, we forfeit the interest we would have earned had the funds remained invested. We lose doubly because we can't collect interest from the Commonwealth, which is essentially borrowing our money free of charge.

While dispelling fears that the MGH solution to this problem would be layoffs in July or September, Dr. Buchanan highlighted the extreme financial stress that the state's fiscal woes are causing hospitals.

Under Chapter 23, the universal health insurance law, the state administration appropriated $37 million for fiscal 1988 to help hospitals cover Medicare shortfalls but then refused to make even one payment. The state promised $100 million to cover Medicare shortfalls for fiscal years 1989-1990. After initially saying that the state could not afford to pay hospitals, the administration this month approved $381 million in emergency funds which included $37 million for hospitals for fiscal 1989. Yet even this is $13 million less than promised for this year. And at deadline for the Hotline, the 1990 budget was still up in the air with the House insisting on a "no new taxes" plan which would underfund Medicaid and leave Chapter 23 out in the cold.

Largely because of the state's failure to keep its promise to hospitals under Chapter 23, a near $8 million deficit remains on the

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MGH will renumber floors and eliminate 3A

Simplicity: ***absence of complexity in form or structure, clarity***

In search of **simplicity**, the hospital has decided to use a more traditional floor numbering system in the new inpatient care facility. A child could do it. Simply count 1, 2, 3, 4 . . . . OOPS! Forgot 3A. Yes indeed. And that is exactly what we are going to do. Forget 3A! It's history.

To make the MGH maze somewhat less of a maze for patients and staff, the administration has decided to do away with floor 3A in the Gray and George Robert White buildings (both adjoin the tower) and in the WACC. You never need suffer the confusion of starting out on floor 3A in one building and walking down a hallway to discover yourself on the fourth floor in the adjoining tower.

The change in how floors are designated will take place on October 1 and will mean a change in the numbering system for rooms as well. In many buildings on the MGH campus, only patient rooms are numbered. So an outpatient in search of a physician's office might receive directions like: "Take a left, go down the hall, and it's three doors past the fire extinguisher."

As floors were renovated, the **Insite System**, which numbers rooms sequentially, was applied. However, the Insite System was not applied to all floors even within one building, and again only patient rooms were numbered. In many cases, the system did not allow for expansion. So if one room was split into two, the second room would receive a number out of sequence. The result was a numbering system which was inconsistent, confusing, and for most purposes unusable.

In the southern corridor of White 8 for instance, the rooms are numbered 894, 886, 807, 808, 891, etc. The rooms in the southern corridor of White 9 have no numbers on the doors at all. And on White 10 the rooms are numbered sequentially.

Ask anyone in Transport. They will tell you that even after many years of working at the hospital, they have yet to discover the logic to how MGH patient rooms are numbered. They have to memorize how each floor in the hospital is arranged, and no two floors are the same.

The elimination of floor 3A is an opportunity to make the numbering system for hospital rooms more consistent. The purpose of the new system is to maintain what Stephen Kauffman, Assistant General Director at the MGH, refers to as horizontal and vertical integrity. Horizontal integrity means that rooms on one floor will have a

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Need help with your computer? Call 726-5085

The hospital has some 1,000 terminal users accessing its mainframe computers in search of information. Computer terminals are used daily by MGH employees to, among other things, access financial records, gather patient information, and generate reports. In fact, at this moment, thousands of fingers are typing commands on computer keyboards. But unfortunately, not all of these computers are cooperating as they should.

If you are plagued by the vagaries of working on a large computer network, never fear, and remember this number: **726-5085**. This is the phone number for the Help Desk (Computer Services Technical Assistance Center). If you dial it, you will find at the other end of the line a computer professional waiting to help you through your worst computer nightmares.

The Help Desk is staffed seven days per week, 24 hours a day. Help Desk employees can solve many problems over the phone. Otherwise, they will send a technician to the site. Help Desk employees are also available to advise you of where to go for computer education, or answer other questions you might have.

Since the Help Desk opened eight months ago, requests for

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Eileen Cummings and Fran Torres (rear) put their expertise on the line. The Help Desk receives more than 1,200 calls each month from computer users in trouble.

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In General

Kathryn Pazola, RNC, MSN, is the recipient of the 1989 Oncology Nursing Career Development Award. Ms. Pazola, who has worked in the Adolescent Unit on Burnham 4 as a staff nurse since 1980, was recognized for meritorious practice in cancer nursing.

Ms. Pazola has developed chemotherapy teaching cards, co-authored a videotape titled "Living for Tomorrow," received a grant to teach school personnel about the needs of the child with cancer, co-developed a school reentry program, and established a remembrance program for the Burnham 4 staff.

It is her consistently excellent patient and family care, however, that forms the basis for this honor. "Caring for teens with cancer is a challenge and a privilege," said Ms. Pazola. "Nurses have an important part to play in their recovery because empowering them with care, support, and knowledge can help them to live fully." Her colleagues agree.

The Oncology Nursing Career Development Award, bestowed for the first time this year, is sponsored by the Friends of the MGH Cancer Center to provide recognition and financial assistance to a staff nurse demonstrating excellence and commitment to professional development. The award is administered by the Cancer Affairs Nursing Subcommittee.

Joanne Goldberg, Chair of the Friends of the MGH Cancer Center, presents the Nursing Career Development Award to Kathryn Pazola, RNC, MSN. Standing to Ms. Pazola's right are Deborah Mayer, RN, MSN, and Lorrie Powel, RN, MS.

Nancy Terres, MS, RN, Pediatric Clinical Nurse Specialist at the MGH, was recently honored for professional excellence at the annual conference of the Boston Institute for the Development of Infant and Parents. Ms. Terres, who is an Assistant Professor at the MGH Institute of Health Professions, was recognized for her expertise in teaching, parent-infant advocacy, and clinical application of research.

The new **Clinical Investigations Unit** of the MGH Dermatology Department has opened permanent offices on the fifth floor of the Warren Building.

The new unit, where clinicians will test proposed new treatments for skin disorders, provides expertise needed to conduct patient care trials and to meet detailed government requirements leading to the licensing of new drug products. Current studies under way in the Clinical Investigations Unit include: studies on psoriasis, aging skin, acne, and fungal diseases. Studies of hair disorders and warts may begin soon.

"I think the most exciting aspect of the unit," said its Director, Dr. Lynn Drake, Deputy Chairman of the Dermatology Department, "is the opportunity it affords us to gain hands-on experience with new drugs that may prove very helpful to our patients."

The unit will actively recruit volunteers for its research. Announcements about upcoming studies will be posted on bulletin boards around the hospital and listed periodically in the Hotline. Anyone interested in research being conducted at the unit can drop in or call Dr. J.D. Fallon, or Olga Harbar, at ext. 5066.

Dr. Morton Swartz, Chief of Infectious Disease at the MGH, was honored with the Distinguished Teacher Award by the American College of Physicians for inspiring future generations of medical educators. Dr. Swartz, Professor of Medicine at Harvard Medical School, has been described by colleagues as an expert diagnostician, able to transmit his expertise with enthusiasm and humor to his colleagues and students.

Dr. Jerome Gross was honored as the first recipient of The Paul Klemperer Award and Medal by the

continued on pa

Town meeting

from page 1

MGH books for 1989 despite the application of about $6 million in reserves. And next year's deficit may reach as high as $25 million.

Dealing with the deficit may mean a salary freeze. "We are considering a freeze in salaries and wages because we are averse to consideration of a reduction in force," said the General Director. "And it is our assumption that it would be better to have a job at the current level of pay than to have no job and have others get an increase." In response to a question from the audience, Dr. Buchanan reiterated that a salary freeze, if employed, would affect everyone in the hospital regardless of position.

An MGH employee raised a question about plans to improve efficiency or consolidate departments. "We cannot wring any more money out of the work force by simply reducing large numbers and at the same time expect to carry on our services and increase our admissions," Dr. Buchanan responded. However, the General Director did point out that a number of small studies are currently under way which will attempt to measure the efficacy of certain types of treatments. "It is clear that we've got to look carefully at whether the utilization of resources in the patient care process is done thoughtfully and critically as to likely outcomes and the expense of those outcomes."

Many institutions are being hard hit because the state lacks revenues to pay for essential health and human services. The state treasury was so close to bankruptcy this month that it barely made the payroll for state employees.

"We live in a state which has an appetite for high quality human services," said Dr. Buchanan. "Sooner or later, we are going to have to take a position as to whether we want to live without those kinds of services for ourselves and the people we hold dear, or whether we want to be advocates for raising the money that is necessary to pay for those services."

The General Director announced the impending retirement of Mr. Lawrence Martin, Associate General Director of the MGH. Mr. Martin has worked for the hospital for 40 years and in September will go to half-time status and devote himself entirely to the completion of the tower project.

The Capital Campaign to fund the construction of the new inpatient care facility has reached slightly over $150 million. With just six months left in the year, we have $18 million more to raise to reach our target.

The acquisition of remaining space in Building 149 at the Charlestown Navy Yard has bogged down because of difficulties in negotiations. And the child care facility at the Navy Yard is on hold until the administration can locate another site. Although there are monies in the budget to fund a child care facility, licensing requirements restrict establishment of such a facility in a building which houses laboratories.

Dr. Buchanan also announced that soon new signage will designate the physicians' dining room as a dining area for all hospital employees. The General Director pointed out that there is a need for a place where caretakers can go and feel free to discuss the care of patients and the work they're doing on the units without being overheard by families who might regard their conversation as objectionable in some way.

Additionally, Dr. Buchanan assured employees of the security of the MGH pension fund despite the hospital's financial woes and announced that estate planning soon would be offered to all MGH employees.

The financial uncertainty that health care institutions are facing have dealt a real blow to the morale of their employees. Yet Dr. Buchanan assured MGH employees that he and the administration share their concerns and stressed the constancy of the MGH mission. "We have a lot that we can say is good. We continue to take care of everyone who comes to us, and I think we do it as well as anybody," he said. "I do have one abiding faith, however, and that is that if this institution can't make it, nobody else can either."

Floor 3A

from page 1

sequential progression such as 405, 405A, 405B, 406, etc. Vertical integrity means that White 405 will be approximately beneath White 505.

Vertical integrity is important for many employees in the hospital who must understand how different floors in a building relate to each other. For instance, a Code Call team must respond to medical emergencies quickly and reach any room within a building within minutes of receiving the call. Indeed, it would be much less confusing for many MGH employees if all floors in a building had a similar numbering system.

The new numbering system will influence how all MGH employees view the hospital. Bigelow 8 will become Bigelow 9, and 9 will become 10. WACC 5 will become WACC 6, and of course White 3A will become White 4.

Preparations for handling logistics and informing the MGH community have been extensive. "This change will require the

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HOTLINE

In general

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New York Academy of Medicine. The award is given for outstanding contributions to the study of connective tissues and their diseases. Dr. Gross is a biologist at the MGH and Professor Emeritus of Medicine at Harvard Medical School

Madelyn Donoff was honored as the *Woman of the Year* at the Third Annual Massachusetts Chapter, Neurofibromatosis Society's black tie dinner in April. This award is given annually to the person who has made the most outstanding contribution to the organization. Ms. Donoff is currently a Speech and Language Pathologist at the Driscoll School in Brookline. She is married to Dr. Robert Bruce Donoff, Chief of Oral and Maxillofacial Surgery at the MGH.

Madelyn B. Donoff

Floor 3A

from page 2

participation of all MGH departments," noted Mr. Kauffman. "And it is a change that will impact anyone in this hospital who rides an elevator." He's right, and that's why we are informing you now. But you have a whole three months to prepare. Count them 1, 2, 3, ~~3A~~....

What's happening

Urgent! Blood needed for Fourth of July weekend

During summer holidays the need for blood is even greater because of increases in accidents and emergency surgeries. The MGH Blood Transfusion Service (BTS) is conducting a Blood Drive on July 3 and 5. All blood types are needed. Call Michelle Fredette at ext. 8165 for more information, or visit the BTS and roll up your sleeves.

Study on diet and kidney disease needs volunteers

Volunteers are needed for a study to determine if diet and blood pressure have an effect on the progression of kidney disease. The Modification of Diet in Renal Disease (MDRD) study is recruiting volunteers who would be willing to modify their protein intake and control blood pressure. Individuals with a chronic kidney condition are eligible for the study if they are 18-70 years old, have a blood creatinine level above 1.2 for women or 1.4 for men, do not take insulin regularly, are not on dialysis, and have not had a kidney transplant. Clinicians will monitor participants' kidney disease and function as well as their blood pressure, diet, and nutritional status at no cost. For more information call Nancy Huggins at 726-3770 Monday – Friday.

Optical shop offers savings on eyewear for MGHers

The Optical Shop at the MEEI is now offering a $15 discount on the price of a complete pair of eyeglasses to all MGH employees and their family members. To qualify for the discount, employees must present an ID badge when placing the order. The Optical Shop is situated on the first floor of the MEEI just across from the General Eye Service. Business hours are Monday - Friday, 9:00 am - 5:00 pm. For information call 573-3183.

Researchers begin study of new treatment to help smokers quit

The MGH has been selected as one of 16 national centers to study the effectiveness of a novel psychopharmacological approach in smoking cessation treatment. MGH researchers Drs. Nancy Keuthen, Owen S. Surman, Lee Baer, Jerrold Rosenbaum, and Nancy Rigotti will explore the benefits of a new drug when used in conjunction with more traditional behavior modification techniques.

Dr. Keuthen, an MGH psychologist and Instructor in Psychology at Harvard Medical School, says that although cigarette smoking is the major preventable cause of death in our country, current treatment methods result in long-term abstinence in less than one-fourth of all smokers.

For more information call ext. 2991 and ask for the Smoking Study Coordinator.

New clinical lab books are on the shelf

The Clinical Laboratories Handbook has been updated. Please come to Warren 1001 between 8:30 am - 4:30 pm, Monday - Friday, to pick up the new contents. You should keep your yellow binder and simply replace the old pages with the new ones. If you have never received a Clinical Handbook, please call ext. 5101 for assistance.

Help desk

from page 1

assistance have tripled from approximately 400 in November to more than 1,200 in March. Users call with problems ranging from an inability to log in to lost data or a blank screen.

Help Desk professionals advise users to first check all connections. Many times the computer is not plugged in or turned on, or the computer is plugged into a surge protector that is turned off. Help Desk professionals also advise users to check the power supply. Fran Torres, Manager of the Help Desk, related the story of a woman who called saying that several of the computers in her office would not work. When instructed to plug a lamp into an electrical socket in the office, she realized that the socket was faulty and she had no electricity.

Many of the difficulties computer users experience result from problems in the communications network. The network refers to the conduits along which signals travel that allow a terminal in the Admissions Department, for instance, to communicate with the mainframe computer at the Navy Yard.

The information you type on your terminal travels as an electrical impulse along a cable to a box called the terminal server. The terminal server routes the signal along the ethernet communications cable here at the hospital. It is the terminal server which controls the flow of traffic. The ethernet cable, a conduit for computer signals, is connected to a microwave dish which sends the signal to another microwave dish at the Navy Yard. Both microwaves are capable of sending and receiving signals. The microwave at the Navy Yard is connected to an ethernet cable, a terminal server, and finally to one of the large mainframe computers.

"There is a lot of hardware and software between the computer and your terminal that can potentially foul up," said Linda Deveau, Manager of User Services.

"Help Desk employees can look at all of these points along the line and locate where you happen to be along the network." Each computer terminal used at the hospital has an identification number which allows Help Desk employees to find your specific signal on the network, diagnose what went wrong, and often fix the problem.

The Help Desk will soon offer support for users of personal computers. Even if your computer is giving you the run around, don't expect the Help Desk staff to do the same. "We don't refer people." said Ms. Deveau. "We take the information and then we make the second, third, and fourth phone call until we have found a solution to the problem."

When you call with a problem, be prepared with certain information. Help Desk employees will ask you what department you are in, the identification number on the blue sticker on your terminal, and what you were doing when the problem arose.

The Help Desk has recently started giving User of the Week awards. Last week's awards went to Ruth Stokes in the Emergency Department for repairing a printer and Paula Spagnola at Spaulding Rehabilitation Hospital for determining the problem with a modem.

Eileen Cummings, a programmer analyst who works with the Help Desk, said that the two women's tenacity, patience, and good humor saved the Help Desk from having to send a technician out. Of Ms. Stokes she said, "Her attitude was wonderful. The emergency ward is one of those high traffic areas, and I could hear over the telephone all of the chaos going on around her."

"Given the hospital's size and complexity, it is a testament to the work force that there are so many long-standing employees. This dedication is what makes the organization work so well on behalf of the patient."
—Jeanette Ives, Director of Clinical Administration

Small Town MGH

More than 10,000 employees keep the wheels turning in Small Town MGH. This photo essay is the second part of a series intended to give you a sampling of what MGH employees do. And as part of our celebration of National Hospital Week, this is a way to give credit where it is due, to those who perform both the ordinary and extraordinary in extraordinary ways. Here, MGH supervisors and department heads go public with what many of us already know. Employees who work at the MGH are the best you can get.

Time for some fun in the mail room.

"The employees of the MGH Institute of Health Professions reflect the special character of the Institute. The Institute is engaged in the education of professionals, and the employees are very professional. The Institute is small, and the employees reflect that smallness through a congenial and caring style which promotes the humanistic values that are a part of the foundation of the Institute." ***— Patrick E. McCarthy, President***

A recreational therapist helps a patient with embroidery.

"The employees of Materials Management fulfill their responsibilities efficiently and quietly," said ***Wayne Newell, Director of Materials Management****. "Many times their efforts go unnoticed. However, without their support, many day to day operations of the hospital would stop. Their dedication to delivering patient care and supporting a world renowned research institution are greatly appreciated."*

In the MGH greenhouse, plants are grown and cared for that will be used by researchers to find clues to diseases and their treatments.

"I am most impressed by our staff's team spirit, their willingness to pitch in, to assist co-workers in times of need, and to do whatever is asked of them to help the department," commented ***Dr. Harry Orf, Director of Labs, Department of Molecular Biology.***

"I appreciate the caring and concern of nurses for patients and their families and their earnest effort to work collaboratively with nursing colleagues, physicians, social workers, and all other disciplines involved in the delivery of patient services." ***— Theresa Mirabito, Director of Ambulatory Care Nursing***

"On January 27, 1989, when an electrical fault in the Warren Basement led to a power outage to several MGH buildings, Buildings and Grounds employees worked over 1,100 hours to restore power to all areas of the hospital. After emergency power was restored, employees worked an additional 2,000 hours to ensure that power was restored permanently and any other potential problems were eliminated. This event clearly illustrates the dedication and unselfishness of the individuals in this department who go the extra mile when it is necessary for the good of the MGH community."
— Greg Doyle, Buildings and Grounds

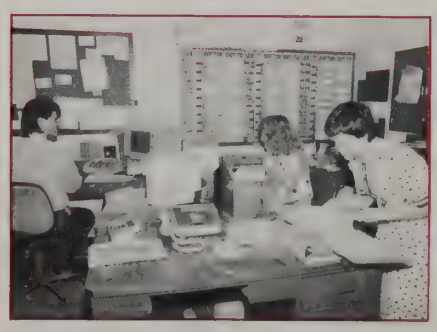
The MGH security force is assisted by a first-rate communications system. Professionalism and competence do the rest.

"I appreciate most those people on our staff who have an individual dedication to excellence and who also have made a commitment to the Radiology Department team in providing outstanding care to our patients." ***— Dr. James H. Thrall, Radiologist-in-Chief***

"The staff of the Department of Biomedical Engineering have always impressed me with their loyalty to the department and their commitment to the hospital and the demands of patient care. This commitment goes beyond the bounds of what any employer has a right to expect, and I appreciate that." ***— Dr. Ernest Cravalho, Chief, Department of Biomedical Engineering***

Treasurer's Office, the first words that come to mind are unity and cohesion. Recent events have required the Treasurer's Office work force to assume additional duties under somewhat difficult time constraints. I appreciate and am proud of the manner in which the staff faced and overcame these challenges. Their efforts will not be forgotten." ***— Peter Blatchford, Assistant Treasurer***

"Day or night, the employees of the Communications Department are here to help you—the patient, the employee, and the public. Their efforts and dedication are truly appreciated," noted ***Richard Crane, Director of Communications.***



"What do I most appreciate about employees in the Emergency Department? I think their ability to perform difficult tasks in a highly strenuous work setting." ***— Ellen Greenblatt, Administrative Manager, Emergency Services***

MGH HOTLINE

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MGH honors Mary Macdonald with portrait

Dr. Charles A. Sanders, General Director during much of Mary Macdonald's 15-year tenure as Director of the Department of Nursing at the MGH, jokingly recalled reading the horoscopes with her after the morning nursing report. "I would always end up with the phrase, 'Well Mary you can be sure that everything's going to work out, and you are going to get what's coming to you.'"

And she has. She has gotten the accolades, love, and respect of her family, friends, former students and colleagues, and the MGH community. And now, her portrait hangs in the Walcott Room in recognition of an illustrious career and unfailing commitment to the MGH.

A standing-room-only crowd filled all three Walcott Rooms for the unveiling ceremony in May. Members of the Board of Trustees and the MGH administration, current and past, were in attendance, as well as many of the senior medical and nursing staffs and Ms. Macdonald's classmates from Emmanuel College and the MGH School of Nursing.

The portrait was commissioned by the MGH Nurses' Alumnae Association. Richard Whitney completed the oil painting from a photograph taken by David Bradshaw. Ms. Macdonald's brother, John Macdonald, attended the ceremony and with Dorothy Mahoney, President of the MGH Nurses' Alumnae Association, unveiled the portrait.

In 1968, Mary Macdonald was appointed Director of Nursing at the MGH when Dr. John H. Knowles was General Director. She had returned to the MGH a year earlier as Director of Analytical Studies in Nursing after serving as Associate Dean and Professor of

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Mary Macdonald remembers with humor the events which brought her to the MGH School of Nursing in 1939. The MGH Nurses' Alumnae Association commissioned a portrait of Ms. Macdonald, a former Director of the Department of Nursing, which will hang permanently in the Walcott Room. The portrait is to Ms. Macdonald's far right and was unveiled at a ceremony in May.

MGH Receiving has express fever

Butch Reed, Assistant Supervisor of the Materials Center and Somerville Receiving, finishes loading a cart with supplies. With the move to the Somerville Warehouse, the Receiving Department hopes to provide next- or same-day delivery on special-order items.

The Receiving Department has given your packages wings and you a promise. The promise? Packages will arrive at their destination by the next business day after the vendor delivers them to the Somerville Warehouse.

With the move to Somerville, Receiving has been able to consolidate and speed up their processing system for packages. When a vendor delivers an item to the warehouse, the package is processed right there. All of the paperwork is done, and the items are loaded, by location, onto red carts.

Each cart goes to a specific building and has a distribution log attached to it which inventories the items on the cart. MGH trucks make from eight to twelve trips each day to deliver the carts and supplies to the main campus, MGH East, or to Spaulding Rehabilitation Hospital.

MGH Receiving handles the delivery and distribution of more than 360,000 items each month. Before the new system, four or five trucks would line up at the Blossom Street receiving dock waiting to unload. When they did, workers in Receiving were faced with trying to process the packages (do the required paperwork and make sure items were entered into the computer system), sort them, and determine where they were to go.

But with only about 1,300 square feet in which to work, they couldn't process items as fast as

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Institute of Health Professions graduates 29

Twenty nine students in programs in dietetics, nursing, and physical therapy were granted masters of science degrees at the ninth graduation ceremony last month of the MGH Institute of Health Professions.

Dr. Nancy Theilgaard Watts delivered the commencement address in which she recalled the history of the Institute including the years of work resulting in its founding.

Dr. Watts is a founding member of the Institute and is an internationally recognized educator and clinical practitioner in physical therapy. She is currently a lecturer in Orthopaedic Surgery at Harvard Medical School and Professor in the Graduate Program in Physical Therapy at the Institute.

In his welcoming remarks, Patrick E. McCarthy, President of the Institute, said of the graduates, "The graduating students are excellent models for today's dedicated young people. As they enter the health professions, they strengthen the national commitment to service. Their chosen professions are among the most honorable."

E. Lorraine Baugh, Chair of the Institute's Board of Trustees and an MGH trustee, introduced the speakers. Elyse Mandell and

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Patrick McCarthy, President of the MGH Institute of Health Professions, introduces the student speakers at the Institute's ninth graduation ceremony last month. Standing to Mr. McCarthy's right are Gretchen Rice (left) and Elyse Mandell.

In General

Lori Dow, Assistant Administrative Weekend Coordinator for White 8, was recently selected as Woman of the Week at Southeastern Massachusetts University (SMU) in Dartmouth, Massachusetts.

Ms. Dow, an MGH employee for three years, is a sociology major at SMU and involved with several campus organizations. She is a student speaker for the SMU AIDS Advocacy Program, Chairperson of the Third World Alliance, a member of the Black Student Union, and conducts tours of the university for prospective students. And as a member of the SMU Theatre Company, Ms. Dow has played a leading role in the musical *The King and I*, and in the opera *Amahl and the Night Visitors*.

As a result of her involvement with the AIDS Advocacy Program, she plans to pursue a career in social work and to work with AIDS patients and their families. "A lot of people [in the Black community] take AIDS for granted, especially people my age," said the 23-year-old. "They think it is only hitting people in the gay community or people over 30. But because AIDS can lie dormant for several years, young people are eventually going to have to deal with it. We have to take precautions now. I want to become involved in helping to provide education, and I want to help the families of people affected by AIDS, because the families need as much support as they can get."

Lori Dow — at work with a smile.

MGHers **Mary Bertucio**, **Lisa Kumuntis**, and **Ildiko McElroy**, all of the Blood Transfusion Unit, have just received Technologist in Blood Banking certification.

Rita Zielstorff, RN, MS, has been appointed to a panel on nursing information systems by the National Center for Nursing Research of the National Institutes of Health. The panel will assess the current state of the science of nursing information systems, identify promising directions, and recommend a program of research. Ms. Zielstorff is Assistant Director of the Laboratory of Computer Science in the Department of Medicine at the MGH, and Patient Care Systems Specialist in the Department of Nursing.

Dr. Ruth Purtilo, Director of the MGH Institute of Health Professions' Program in Ethics and Ethicist at the MGH, has been designated the 1989 Catherine Worthingham Fellow of the American Physical Therapy Association (APTA). The APTA recognized Dr. Purtilo for her work in advancing the science, practice, and knowledge of the physical therapy profession.

Ellen Anderson, MS, RD, a faculty member of the MGH Institute of Health Professions Graduate Program in Dietetics, chaired the two-day annual convention of the Massachusetts Dietetic Association held in Andover, MA, this year.

Joan Kelly Arsenault, MA, CCC, MGH Speech-Language Pathologist and Inpatient Coordinator of the Speech-Language Pathology Department, has been a frequent speaker on the evaluation and treatment of swallowing disorders. She spoke recently at the New Jersey State Speech-Language Hearing Association Conference, gave a 1½ day workshop at Memorial Hospital in Rhode Island, presented a paper at Cape Cod's Annual Spring Lecture, and participated in the Massachusetts Hospital School's medical grand rounds. She was also invited by the National Institute for Health and Human Services to speak at a conference on Nutritional Care and Rehabilitation. And she spoke at a conference sponsored by Wrentham State School.

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Luncheon honors MGH interpreters

Opening doors and building bridges is what MGH interpreters do. They open the doors to communication between patient and health care provider. And they build bridges for cultural understanding.

Last month the MGH administration sponsored a luncheon to recognize the valuable service MGH interpreters provide. Margarita Battle, Coordinator of Interpreter Services, addressed the group and noted, "The interpreter, through the knowledge of both languages and the understanding of both cultures, is capable of opening a door and allowing for contact to be made between the patient and the medical-care provider."

Often the patient has difficulty explaining symptoms, understanding the procedures being performed or suggested, or is frightened and overwhelmed by a foreign environment. Imagine the lack of control a foreign person experiences who must undergo an examination or medical procedure while not being able to talk to the provider. Said one patient, "Before I found an interpreter, I felt like a blind man!"

Interpreter Services provides translation and interpretation in more than 40 different languages. Interpreters respond to more than 2,500 calls each year.

The service has produced a bilingual booklet for patients in 14 languages and a handout that uses pictures as a communications tool for nurses and their non-English speaking patients. Interpreter Services has also acquired an educational video on how to use an interpreter to conduct a medical interview. And with the help of the Department of Dietetics, the service has developed food lists in a variety of languages to give foreign patients more control over what they eat during their stay at the hospital.

The luncheon recognized the 110 bilingual MGH employees and the 55 bilingual MGH volunteers who lend their services as interpreters for health care providers and patients. The service is also supported by bilingual MGH residents and fellows who bring their medical expertise to the process as well. MGH supervisors and coworkers who make it possible for bilingual employees to take the time to respond to requests for interpreters (many times at short notice) were also recognized at the luncheon.

The following employees were recognized for their contributions to the Interpreter Service.

Picture Awards went to:

Persephone Poulos, Orthotics and Prosthetics
Suntara Say, Clinical Administration
Yau Kai Wong, Urology Research
Sal Picceca, Orthotics and Prosthetics
Grace Oliveira, Reproductive Endocrine Unit
Thanh Tran, Pharmacy
Susan Courtney, General Director's Office
Carmen Aguirre, Medical Records

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Patricia Rowell, Director of the Volunteer Department, addresses volunteers, interpreters, and other MGH employees who support the Interpreter Service. The MGH administration last month hosted a luncheon for the Interpreter Service. The service is coordinated by Margarita Battle.

MGHers Can Do when it comes to providing needed services for patients

When Susan Philip entered the hospital for hip surgery last month, she had some special concerns. Ms. Philip is deaf and communicates by using American Sign Language. Hospitals frightened her, she said. And she wondered if the MGH could meet the special needs of a hearing-impaired patient. Ms. Philip needn't have worried, because MGH care providers are always ready to pitch in and go the extra mile for a patient in need.

Dr. Henry Mankin, Chief of Orthopaedic Surgery, called Julie Atwood Wheelden, MEd, CCC, Director of Speech-Language Pathology, and asked that she arrange interpreters and other services for his patient. Lori Rich, MS, CCC, Speech-Language Pathologist, provided sign language interpretation for Ms. Philip.

Thomas Marcussen, Director of Televised Educational Services, provided a television set with a decoder (closed captioning equipment). Mr. Marcussen says that a limited number of decoders are available for hearing impaired patients. But soon the hospital hopes to provide closed captioning on the three major networks and PBS. In this case, decoders won't be necessary.

Mr. Marcussen also worked with Molly Granberry of Communications and Stan Grisbeck of Biomedical Engineering to equip Ms. Philip's telephone with a teletypewriter (TTY) and a light that would tell her when the phone is ringing. The teletypewriter, which was provided by the Department of Social Service, is a combination typewriter-modem which allows a person to communicate by telephone by typing messages on a keyboard.

In addition to providing expert nursing care, Mary-Jean Conroy, RN, Ms. Philip's primary nurse, also helped address her communication needs. Ms. Conroy arranged for an evening and night nurse to take care of all of Ms. Philip's nursing needs for the duration of her stay at the MGH. "I tried to limit the number of people whom she had to communicate with and to provide consistency in care. I think her needs were met very well," commented Ms. Conroy.

Jean Phillips, RN, was Ms. Philip's evening nurse, and Viola Baker, Nurses Aide, cared for Ms. Philip at night. Ms. Conroy said that her patient was very knowledgeable about her communication needs and assisted in developing her own care plan. Ms. Conroy made flash cards for her patient as well, and Ms. Philip taught her nurse some sign language. Chris Goodyear, PT, was Ms. Philip's physical therapist. Liz Ryder, RN, MSN, of the Anesthesia Pain Unit, and Leila Gupta, MSW, of the Department of Social Service, also worked with Ms. Philip.

Ms. Philip said that though she was afraid of hospitals, her relationship with Dr. Mankin and the willingness of the MGH community to address her needs made her stay here much easier.

Lori Rich, MS, CCC, Speech-Language Pathologist (right), uses American Sign Language to communicate with Susan Philip.

What's Happening

The Chaplaincy Department has moved

The Department of Pastoral Services has a new name and a new address. It is now the Chaplaincy Department and is situated on Clinics 3. The extension is the same. Dial ext. 2220 for a Chaplain.

Dole visits the MGH

Robert Dole, Republican Leader in the U.S. Senate, visited the MGH last month. Here Dr. R. Rox Anderson (far right) explains how lasers are used to treat portwine stains, tattoos, glaucoma, and cardiovascular disease. Standing from left to right are Dr. John Parrish, Chief of Dermatology, Dr. Lynn Drake, and Senator Dole.

Much of the funding for laser research at the MGH comes from the federal government's Medical Free Electron Laser Program which is part of the Strategic Defense Initiative. Senator Dole was interested in the research and requested the visit.

During his tour of the laser lab, the Senator used a laser to break up a kidney stone that had been placed in a glass of water. Drs. Peter Kobsa, Tayyaba Hasan, Kenton Gregory, Bill Farinelli, and Norman Nishioka also gave presentations on their research. A reception followed Senator Dole's tour of the Wellman laboratories.

Graduation

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Gretchen Rice were the student speakers. The invocation was delivered by the Rev. Dr. Phillip King, Director of Clinical Pastoral Education at the MGH.

To the applause of the graduates' families, friends, and colleagues, President McCarthy conferred degrees and honors on the graduates. Five students in the program in Dietetics, 15 students in the nursing program, and nine students in the program in physical therapy received masters of science degrees.

The Louise Hatch award for excellence and leadership in the field of dietetics went to Deborah Rey Konkle. Louise Hatch, a former Director of the MGH Department of Dietetics and the Dietetics Internship, helped establish the program in Dietetics at the Institute. Excellence in Clinical Nursing Practice Awards were given to Janet Marie Gallant and Pauline Anita Vashon. Dr. Watts was the recipient of the Award for Excellence in Teaching and an emeritus professorship.

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William E. Walch, *Vice President for Resource Development and Public Affairs*

Martin S. Bander, *Director of News and Public Affairs*

Kennetha J. Bigham, *Editor*

Doris G. Schreckengaust, *Copy Editor*

Receiving

from page 1

needed, and packages would often accumulate. And, because of the confusion at the dock, it was difficult to make sure an order was complete and hold vendors accountable for delivering what they had promised. "Many of these items go to the research community, and some of them are time sensitive," said Butch Reed, Assistant Supervisor of the Materials Center and Somerville Receiving. "Misplaced packages or incomplete orders can cost thousands of dollars in lost research time. This new system will help the hospital run more efficiently by getting materials to the people who require them faster."

The receiving area in Somerville is almost twice as large as the space at Blossom street. Workers have room to move about and sort packages in an orderly fashion. And when the carts are delivered by truck to Blossom Street, the dock workers simply unload them and wheel them directly to the floors. No longer need departments wait three or four days for delivery after receipt.

Another advantage to the new system is the carts themselves. The carts are more compact and easier to move through hallways, quieter and easier on the floors. As well, the new carts have brakes which increase safety by preventing them from rolling off of the trucks.

The new procedure applies to nonstock or special order items like computer equipment, special machinery, or chemicals. Stock items which the hospital uses regularly, like linens, bandages, or gloves, will be handled as usual through inventory.

The physical expansion of the MGH complex was the primary reason for the change. The small receiving dock at Blossom Street can not handle the increase in traffic which will result from the completion of the new inpatient care facility and the expansion of research space at the Charlestown Navy Yard.

As well, when the Baker Building is demolished and work begins on the second tower, the Department of Dietetics will use the Blossom Street Receiving dock for food delivery. "We needed an innovative solution to the receiving problem. We had to think of a way to both handle the work flow more efficiently and to get materials to the end-user faster," said Mary Riffe, Manager of Supplies and Inventory in Materials Management. "We've had the system in place since last September. So far, we are very pleased, and we think the MGH community has started to notice the difference."

Interpreters

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Gabriela Buzzi, Stroke Research
Louise Tai, Volunteer
Dr. Heng Ung, Volunteer
Frances Valvo, Gift Shop and Volunteer
Elvira Nunez, Volunteer
Teena Eleftherakis, Volunteer

These employees and volunteers received awards for helping to produce the bilingual booklets for patients.

Louise Tai, Volunteer
Muffy Lutzin, Recreational Therapy
Marina Wood, Volunteer
Susan Courtney, General Director's Office
Leila Abouhamad, Volunteer
Yolanda Kovalko, Chaplaincy
Dr. Andormachi Scaradavou, Resident, Childrens Service
Slava Latnik, Biostatistics
Cathy Anderton, Volunteer
Boona Ith, Cardiac Research
Saravuth Ouen, Cardiac Research
Rachelle Regis, EKG Lab
Hau Tran, Personnel

Martha Lynch of the Department of Dietetics was recognized for her contributions to the production of the multi-lingual food lists for patients, and Beverly Campbell of Communications was recognized for coordinating the evening and weekend interpreters.

In general

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Dr. Eugene Courtiss (right), an MGH plastic surgeon and Assistant Clinical Professor of Surgery at Harvard Medical School, accepted the Special Merit Award of the American Society for Aesthetic Plastic Surgery (ASAPS) from Dr. Gaspar Anastasi, immediate past president of the ASAPS, at the society's annual meeting. The award, which has been given to only four individuals in ASAPS' 22-year history, recognizes outstanding contributions to the society.

Mary Macdonald

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Nursing Education at the University of Massachusetts School of Nursing in Amherst.

During her stewardship of the MGH nursing department, Ms. Macdonald sought to expand the professional status of nursing. She changed the department's name from the Nursing Service to the Department of Nursing and restructured nursing practice to reflect the patient care, teaching, and research aspects of the profession.

In his comments during the unveiling ceremony, Stephen Kauffman, Assistant General Director, spoke of the rapidly changing environment Ms. Macdonald faced as Director of Nursing. "It was an enormous era of change," he said. "Mary entered the MGH at a period of time when we were about to see some social and value ridden revolutions in this nation. The Vietnam war was in its beginning stages. The Civil Rights movement was starting. We saw the beginning of the impeachment of one president, and we elected an actor for another.

"Within a period of a few years we expanded the number of intensive care units which was to have a profound impact on the recruitment and the responsibilities of nursing. It is with this that Mary Macdonald had to cope as the Director of Nursing, and she did it well."

When Ms. Macdonald arrived in 1967, the Department of Nursing had a 78% turnover rate. Within five years she had reduced turnover to 37%. She began efforts to quantify nursing practice. She decentralized the department, giving nurses more autonomy, more room for creative problem solving, and improved professional esteem. She instituted interdepartmental committees to involve the nursing staff in policy making and to improve communications.

She imbued the department with her own philosophy of nursing— according to Ms. Macdonald, the professional practice of patient care whose results can be measured. And said Mr. Kauffman, "She integrated all of us into a community of care takers and support providers and made us feel important."

In her comments during the unveiling ceremony, Ms. Macdonald spoke of the events that brought her to nursing. "Despite the fact that my mother was a practicing registered nurse, it was Dr. Elliot P. Joslin {founder of the Joslin Clinic} who suggested that I consider the pursuit of a career in nursing education. When the name of the MGH School of Nursing was raised, he quietly responded, 'Mary I'll tell you one thing. It will make you or break you.'" It was this challenge she said that brought her to the MGH School of Nursing in 1939.

Ms. Macdonald is a graduate of Emmanuel College, received her Masters of Arts degree from Teachers College at Columbia University, and pursued doctoral study at the Boston College Graduate School of Arts and Sciences. She has held teaching and administrative appointments at the Worcester City Hospital, Burbank Hospital in Fitchburg, and the Boston College schools of nursing.

Her teaching, research, and publication accomplishments are extensive. And she has made significant contributions to many professional organizations. She was named a Fellow of the Academy of Nursing in 1975 and holds honorary membership in the American Nurses Association. She was Vice-Chairperson of the committee on Ethical, Legal, and Professional Standards of the American Nurses Association, a Board Member of the Massachusetts League for Nursing, and a member of the Advisory Council in Nursing of the Massachusetts Board of Higher Education, to name a few.

During the ceremony, Dr. Sanders presented Ms. Macdonald with the key to Worcester, and Mr. Kauffman presented her with a citation from Emmanuel College in recognition of the 50th Anniversary of her graduation.

"It is not these accomplishments that endear Mary to us," said Mr. Kauffman. "It is what she did as a person. She had an unfaltering wisdom and an unselfish commitment to her profession and to this institution. She had a vision, and she drove us all toward it.

"I thought Mary was my critic; she was my teacher. I thought Mary was my antagonist; she was my conscience. I thought Mary was the Director of Nursing; she was the soul of a great institution."

In her closing comments, Ms. Macdonald thanked the MGH trustees, administrators, and her former colleagues and staff for their long-standing loyalty and support. And she expressed special thanks to Dr. Joslin. "One thing I am going to do," she said, "is send an overnight express note heavenward to read thus— 'I made it! Thanks alot!'"

When Ms. Macdonald retired from the MGH in 1983, she said that she intended to pursue a law degree and hoped to write a bestseller. "I can do at least as well as Robin Cook," she told a Hotline reporter then.

On Monday, July 17, Ms. Macdonald turned 71 years old. She is taking law-related courses at Suffolk University, though she says she won't pursue a degree. The bestseller is on the back burner for now— until she can free up some time from other pursuits.
Robin Cook, beware.

MGH HOTLINE

10 August 1989

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Bartlett 9, Extension 2206

On Dr. Stoeckle's 40th, homeless shelter gets medical library

Dr. John D. Stoeckle, Chief of the Medical Clinics at the MGH, says that the health care quarters at the Pine Street Inn remind him of the community-based free clinics of the 1960's and the MGH Walk-In Clinic in its infancy. Supplied largely by the beg, borrow, or barter method, the Pine Street Inn clinics operate in the true spirit of entrepreneurial medicine. And recently, the MGH offered a helping hand.

In recognition of Dr. Stoeckle's 40th year at the MGH, the Internal Medicine Associates (IMA) donated $1,000 to establish a medical reference library at the Pine Street Inn, a local homeless shelter. Accompanied by colleagues from the IMA, Dr. Stoeckle recently toured the shelter and dedicated the library.

Dr. John D. Stoeckle reviews the Pine Street Inn's new medical reference book collection. The books were purchased with a $1,000 donation from the Internal Medicine Associates in honor of Dr. Stoeckle's 40th anniversary at the MGH. From left to right are Joan Gold, RN, Head Nurse in the Women's Clinic; Eileen McGee, RN, Head Nurse at the Fort Point Shelter (one of Pine Street Inn's satellite shelters); Maureen Keating, RN, a nurse in the Men's Clinic; and Dr. Stoeckle.

The Pine Street Inn shelters up to 1,200 homeless women and men each night. Clinics for them are staffed by six registered nurses, two clinic coordinators, and a physician from the Boston Health Care for the Homeless project who visits three times each week. (See related story, *MGH internist honored for work with the homeless*, on page 3.)

The library, which includes 28 reference and general interest books on health and medicine, will be used by the medical staff and shelter residents. "The library has proved to be a valuable resource," said Charlie Black, RN, Head Nurse in the Men's Clinic. "We sometimes feel professionally isolated because we don't have a connection with a hospital. These are good reference books that will help us to keep up-to-date on the health care concerns of our guests."

Dr. Stoeckle, who is also Professor of Medicine at Harvard Medical School, came to the MGH as an intern in 1948. Long interested in care outside the hospital, he is one of the pioneers of primary care internal medicine and started the MGH residency in the field in 1979.

In 1985 he coauthored, with Dr. George Abbott White, the book Plain Pictures of Plain Doctoring which examines the Farm Security Administration's rural medical program of the 1930s and 1940s. The book is a compilation of 80 photographs the FSA commissioned to document the program—a precursor to the modern HMO. From 1935 to 1942, the FSA photographers, including such notables as Dorothea Lange, Gordon Parks, and Russell Lee, produced more than 250,000 images—2,000 of which were of the medical program.

Drs. Stoeckle and White use these images to examine the evolving relationship between physician and patient. The photographs themselves are poignant reminders of plain doctoring and starkly contrast the specialized techno-medicine of the 1980s.

Dr. Stoeckle is regarded as an exceptional educator especially in the area of the patient-doctor relationship. He has done pioneering work on the medical interview, clinical organization, and psychosocial factors in illness.

He has served on editorial boards of several professional publications including Social Science and Medicine and Medicine in the Public Interest. And for three years he served as Associate Editor of the Annals of Internal Medicine.

Dr. Stoeckle is a Fellow of the American College of Physicians and a member of the Committee on

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MGHers graduate and some plan for college

Doing it the MGH way sometimes means going the extra mile. And seven MGH employees recently went the distance. At a ceremony held at Harvard University in June they received high school diplomas from the Christopher Columbus High School.

Many of these students also completed the hospital's English as a Second Language (ESL) course, and several employees will attend college next year.

For Marie Allien, a Unit Assistant on Phillips House 4, completing the high school diploma program and the ESL course while caring for her children and continuing her full-time job at the MGH was tough but worth it. "I felt so good when I went back to school," she said. "My memory was so fresh. I was like a 12-year-old girl again."

Ms. Allien, who has worked for the hospital for 17 years, feels that her improved language skills will help her better communicate with patients. And she's not finished yet. She plans to apply to the University of Massachusetts and Bunker Hill Community College.

At the ceremonies, the MGH was recognized for long-term commitment to workplace education programs for its employees. Kathy Rice, Assistant Director of

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Oreste Merome, of the Department of Dietetics (Baker/Phillips), begins preparation for lunch. He said of the high school diploma program, "It was a good opportunity to continue my education. I learned a lot from this program, and next year I plan to apply to college."

In General

Dr. Edwin P. Maynard, an MGH internist and gastroenterologist, has been elected President of the American College of Physicians (ACP). Dr. Maynard, who has served as ACP President-elect for the past year, has been active in the ACP since 1977 and was the first Chairman of the college's Health and Public Policy Committee. He recently completed two terms as Board of Regents Chairman and has been an ACP regent since 1981. Dr. Maynard is Associate Clinical Professor of Medicine at Harvard Medical School and beginning in 1977 served as Governor of the Massachusetts chapter of the ACP.

Dr. Edwin P. Maynard

John Nolan is the new Director of Parking and Commuter Services. Mr. Nolan has a Master's degree in Management from Lesley College. He began working for the MGH in 1970 in the Radiology Department. From 1975 until 1986 he worked in Clinical Administration as a Unit Coordinator and Unit Manager. Since 1986, Mr. Nolan has been an Employee Relations Representative in Human Resources where he also served as the hospital's affirmative action officer.

Dr. Thomas Stossel, Chief of the Hematology-Oncology Unit at the MGH and American Cancer Society Professor of Medicine at Harvard Medical School, was the invited representative for medicine on a panel at an American Medical Association conference on national investment in science and technology. Other panel participants were Thomas R. Thomsen, President of AT&T, Dorothy Meletzke, Assistant Secretary of the Navy, astronomer Carl Sagan, and Senator John Glenn.

Ellen Donahue, MS, CCC, MGH Speech-Language Pathologist, was a guest lecturer at the Berklee School of Music. Her topic was "Prevention and Treatment of Voice Disorders Among Professional Voice Users."

Sandra Martin, MA, CCC, an MGH Speech-Language Pathologist, recently lectured at Milford Hospital's grand rounds on "Dysphagia: Diagnosis and Treatment."

Dr. Margaret Schenkman, PT, Assistant Professor of Physical Therapy at the MGH Institute of Health Professions, Coordinator of the Neurology Specialization of the Physical Therapy Program, and Chair of the Faculty, has been awarded a one-year engineering fellowship in the MIT-Harvard Career Development Program in Advanced Rehabilitation Research sponsored by the National Institute on Disability and Rehabilitation Research.

Dr. John T. Potts, Jr., Chief of General Medical Services at the MGH and Jackson Professor of Clinical Medicine at Harvard Medical School, is the recipient of the 1989 Distinguished Graduate Award from the University of Pennsylvania where he received his M.D. degree in 1957.

The award was presented to Dr. Potts in recognition of his pioneering work on parathyroid hormone and calcitonin. Through research and clinical practice, Dr. Potts has provided new insights into normal mineral metabolism and how it is altered by disease. The award also recognized Dr. Potts for developing treatments for the management of disorders of calcium and bone metabolism. Dr. Potts addressed his fellow alumni and alumnae on "How Molecular Biology Transforms Medicine: A Personal Perspective on Parathyroid Hormone Research."

Dr. John T. Potts

Dr. Patricia Donahoe, Chief of Pediatric Surgery and Director of the Pediatric Surgical Research Laboratories at the MGH, recently received a national research grant from the American Cancer Society. Dr. Donahoe, who is also Professor of Surgery at Harvard Medical School, is using her two-year grant to test new chemotherapeutic treatments for ovarian and endometrial cancers. The endometrium lines the inside of the uterus.

Dr. Oliver Cope, Senior Surgeon at the MGH and Professor of Surgery Emeritus at Harvard Medical School, accepted an honorary Doctorate of Humane Letters in June from Suffolk University. After noting that Dr. Cope had received honorary degrees from the University of Rhode Island, Haverford College, and Toulouse University in France, the citation read, *"Suffolk University is pleased to join today with these distinguished sister universities in celebrating your pioneering spirit and scientific achievement as well as your lifelong commitment to healing."*

Dr. Cope was formerly Acting Chief of Surgery at the MGH and was honored at the 1988 Ether Day Service Pin Ceremony for 60 years of service to the hospital.

Dr. Richard Gelberman, Chief of the Hand Surgery Service and Professor of Orthopaedic Surgery at Harvard Medical School, is this year's winner of the Nicholas Andry Award of the Association of Bone and Joint Surgeons for his paper *Peripheral Nerve Compression Experimental and Clinical Studies with Special Reference to Carpal Tunnel Syndrome.* The award was established in 1961 to encourage research in orthopedics.

Dr. Deanna Pearlmutter, Director of Surgical and Psychiatric Nursing Services testified before a Senate committee in favor of Senate 518, a bill to amend the Massachusetts Nursing Practice Act. The legislation consolidates laws regulating nursing practice and seeks to address the nursing shortage by professionalizing nursing.

Dr. William Lavelle, former Clinical Associate in the General Surgical Service at the MGH, was elected to a one-year term as president of the Massachusetts Medical Society at the society's 208th Annual Meeting in Danvers, Massachusetts. Dr. Lavelle is Associate Professor and Chairman of the Division of Otolaryngology at the University of Massachusetts in Worcester.

MGH internist honored for work with the homeless

Dr. James J. O'Connell, MGH physician and Director of Boston Health Care for the Homeless, is this year's recipient of the Isaac Hecker Social Justice Award.

The award, named in honor of the founder of the Paulist Fathers, pays tribute each year to an outstanding American Catholic who has been a leader in creating a more just and compassionate society. Dr. O'Connell was recognized for his work to provide better health care to homeless people in Boston.

Dr. O'Connell, who is also Clinical Associate in Medicine at Harvard Medical School, was planning to specialize in cancer care (oncology) until he began work in a clinic of the MGH Internal Medicine Associates where he treated several homeless men.

"Now I am insatiably curious about health care delivery to poor and indigent populations," he said. "And though oncology is still an interest, I intend to continue my work with the homeless."

The Boston Health Care for the Homeless project provides a variety of health care services through outreach clinics at homeless shelters and primary care clinics at the MGH, the New England Deaconess Hospital, and Boston City Hospital. The program also utilizes portable equipment to make dental care accessible to homeless people at shelters.

A 25-bed respite unit, established at the Shattuck Shelter to care for homeless people recovering from illness, helps address the problem of bed usage in acute care facilities. Often, a hospital must keep a patient longer than necessary because if discharged, the patient has nowhere to go.

The Boston Health Care for the Homeless project was originally funded by the Robert Wood Johnson Foundation and the Commonwealth of Massachusetts to provide access to quality health care for homeless people.

Dr. O'Connell says that his goal is to utilize the existing health care system to address the medical needs of the homeless. "We have excellent resources in Boston," he said. " We have to make sure the homeless have access to them."

Stoeckle

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Ambulatory Care Standards of the Joint Commission on Accreditation of Hospitals. He recently received the Robert J. Glaser Award from the Society of General Internal Medicine. This annual award recognizes a clinician who has made exceptional contributions to research and education in the field of general internal medicine.

HOTLINE

What's happening

Treadwell expansion means new entrance

The Treadwell Library has a new front entrance on the first floor of the Bartlett Extension facing the WACC. As of August 21, you can no longer gain access to the library through the Blossom Street entrance.

The expansion into the Bartlett Extension will add two floors to the library's space. Because of the move, the library will be close on August 21 until 1:00 pm. Regular hours are Monday through Friday, 8:30 am - 10:00 pm; Saturday, 9:00 am - 6:00 pm; and Sunday from 2:00 - 8:00 pm.

Telephone tips

The operators in Communications have some helpful hints for MGHers who use the phone.

- Before calling a physician's answering service, try the office. If the doctor is in, your message will reach him or her faster. And even after hours, the answering service will pick up a call coming to a physician's office.
- Remember who's calling. Many people who call the hospital are patients or family members who are distressed. Be gentle. The person on the other end of the line is likely sick or worried, or may have a complex question that is important but difficult to explain quickly.
- Hold on before you say *"Hold."* First, find out the reason for the call. Some things need immedi ate action and it is disconcerting to be put on hold before getting a word out.
- Before calling Communications for a phone number, make sure that you consult your blue telephone book. You can get updated directories from Materials Management in the Gray basement. The new directories will be available in the fall. The blue binders can be ordered from Towhill, the hospital's office supplies vendor. Don't discard old binders. Simply replace the old contents with the new pages.

The MGH HOTLINE is published twice monthly by the MGH News Office.

William E. Walch, *Vice President for Resource Development and Public Affairs*

Martin S. Bander, *Director of News and Public Affairs*

Kennetha J. Bigham, *Editor*

Doris G. Schreckengaust, *Copy Editor*

Researchers studying insulin infusion pumps need diabetic volunteers

The Diabetes Research Center is seeking volunteers for a study involving implantable insulin infusion pumps. The pump is surgically placed underneath the skin and continuously delivers low doses of insulin intravenously as well as giving larger doses before meals. It is operated by means of a hand-held programmer which transmits instructions by radio waves. Less sophisticated models have been approved and are currently in use, not only for insulin but for chemotherapy and anticoagulation therapy as well.

Applicants must have type I diabetes and be between the ages of 18 and 45. Diabetes care and supplies will be provided free of charge, and long term follow-up will be available. For more information call ext. 1847

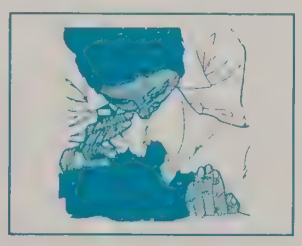
Stroke support group for MGH patients

The Speech-Language Pathology Department sponsors an adult communication stroke group for MGH patients.

The purpose of the group is to provide a transition from individual speech-language treatment to a more natural communication environment. The group will also help patients deal with some of the major life changes that often accompany a stroke. Patients share common experiences such as loss of employment, changes in family structure and roles, and difficulty communicating and walking.

The group is open to all appropriate patients and meets Thursdays from 11:30 am -12:30 pm in the Speech-Language Pathology Department in WACC 637.

To make a referral or obtain more information, contact JoEllen F. Cumpata, at 726-2763.



Can you save a life?

Cardiopulmonary resuscitation is a lifesaving technique that anyone can learn. The Employee Health Service conducts classes in CPR that start the first Wednesday of every month. These free classes are appropriate for MGH employees who have little or no medical training. After completion of two three–hour sessions, you will receive American Heart Association certification in CPR. Call Employee Health at ext. 1625 for more information.

Adult diploma

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Human Resources, accepted the award on behalf of the hospital. Since 1982, 49 MGH employees have graduated from the Adult Diploma program with high school diplomas.

Carmen Fields, news co-anchor for WGBH-TV, delivered the commencement address to the approximately 500 graduates, guests, friends, and colleagues in attendance at the ceremonies. A reception followed the graduation exercises.

The MGH employees who received diplomas were:

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Marie Allien, a Unit Assistant, takes inventory of a medical supply closet on Phillips House 4. Ms. Allien, who received her high school diploma last month, compared her excitement about learning to feeling like a 12-year-old girl again.

Mr. Gerald Abrams (left), of Freshwater Fish Company, Inc., presents a contribution of $10,000 to Dr. Lloyd Axelrod, Physician at the MGH, for the Oscar Abrams Memorial Fund for Diabetes Research and the National Fisheries Institute Scholarship Fund. Dr. Axelrod, who is also Associate Professor of Medicine at Harvard Medical School, says the donation will be used to investigate the use of dietary fish oils (Omega-3 fatty acids) in the treatment of diabetes mellitus.

Retirements

Best wishes to the following MGHers who have recently retired:

April, 1989
Annie Crowley, Credit and Collections, 21 years
Wilhelmina Kettell, Social Service, 22 years

May, 1989
Ulric Brewster, Environmental Services, 17 years
James Cicerone, Supply Services, 13 years
Florence Dell'Orfano, Radiology Support, 18 years
James Johnson, Dietetics, 29 years
Edward Phillip Oliver, Admitting, 20 years
Leo Roman, Orthopaedics, 34 years
Mara Vajda, Radiology, 16 years

June, 1989
Betty Bawdekar, Social Service, 16 years
Karin Knox, Pathology Lab , 10 years
Leonardo Reyes, Environmental Services, 20 years
Clara Savage, Clinical Administration, 16 years

Phillip Oliver of Admitting was delighted by a surprise visit from friend and former MGHer Gladys Reavis at his retirement party in June. Mr. Oliver worked for the hospital in several capacities for 20 years and retired in May. The June party was hosted by Admitting. And the Beacon House, where Mr. Oliver worked before going to Admitting, hosted a retirement party for him last week.

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(Left) Dr. George Prout accepts flowers from Ms. Elizabeth Honey, a former MGH employee, at his retirement party last month. Dr. Prout served as Chief of Urology for 20 years.

Adult diploma

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Marie Allien, Clinical Administration
Ingrid Beckles-Rodney, Clinical Administration
Ronald Bradshaw, Communications
Cloraine Allien Chery, Clinical Administration
Oreste Merome, Baker/Phillips Dietetics
Jean Noel, Environmental Services
Rosa Quarato, Clinical Administration

The Adult Diploma Program is coordinated by Training and Development. The program is designed for employees who want to earn a high school diploma while they are working. Credit is given for classroom work as well as life experience.

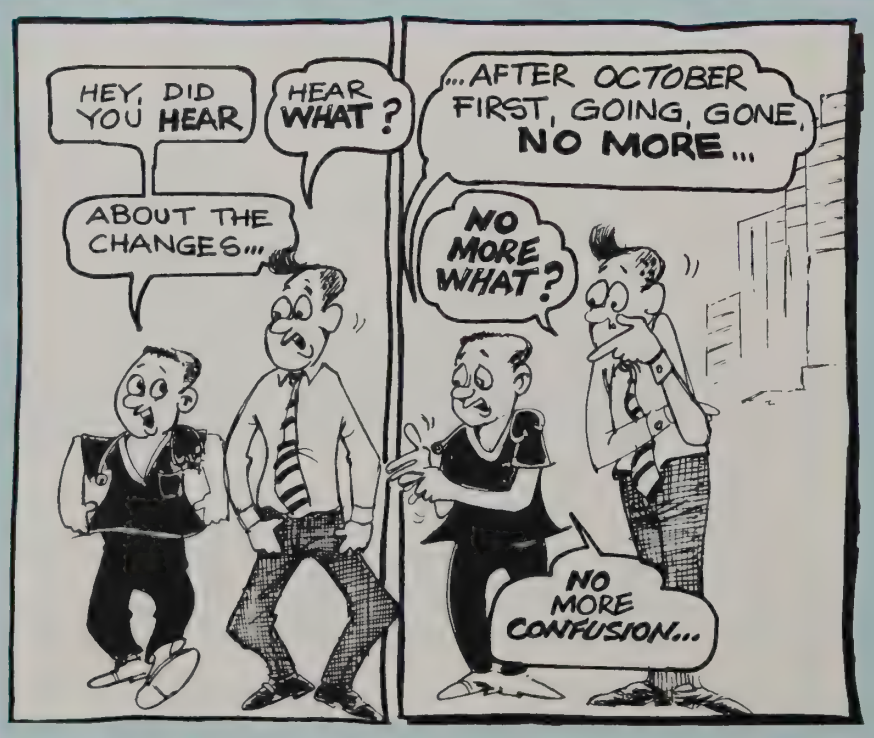
Training and Development offers a wide range of training opportunities to meet the career and personal growth needs of employees. Call Training and Development at ext. 2230 for more information.

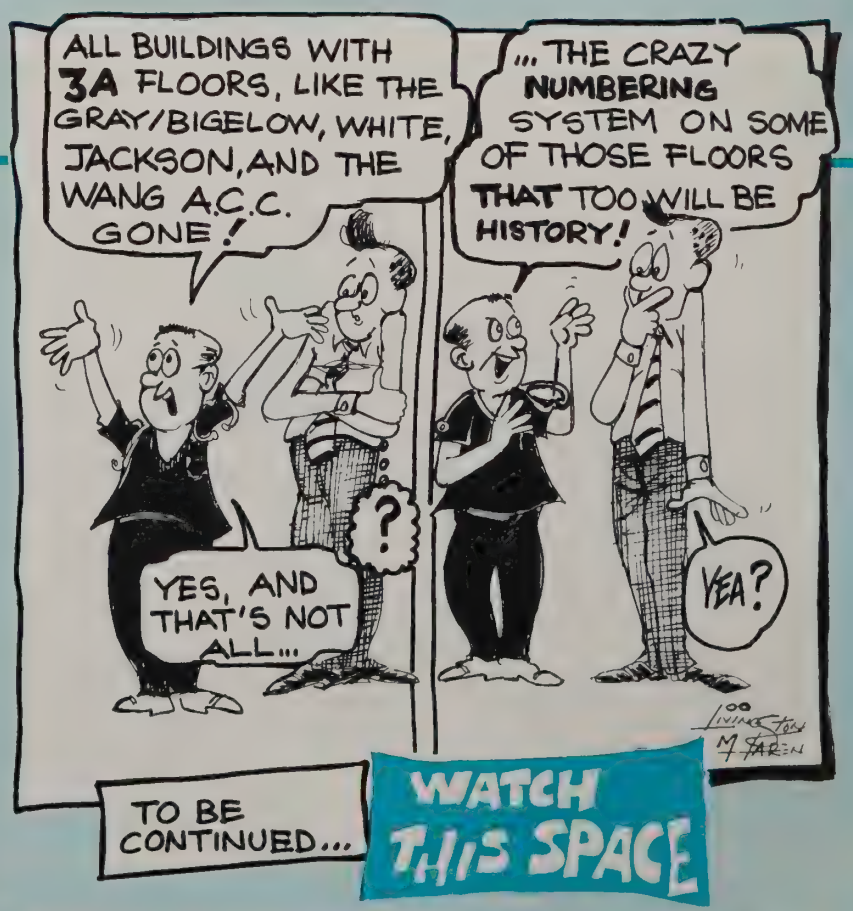
Well wishers joined Dr. Nancy Theilgaard Watts,Professor Emeritus at the MGH Institute of Health Professions, in celebrating her retirement last month. Here, Dr. Watts (center) converses with E. Lorraine Baugh,Chair of the Institute's Board of Trustees and MGH Trustee, and Patrick E. McCarthy,President of the Institute. Dr. Watts, a founding member of the Institute, retired as Professor in the Graduate Program in Physical Therapy.

WHAT'S NEW IN NUMBERS

by Livingston Mclaren

Coming October 1st




ALL BUILDINGS WITH 3A FLOORS, LIKE THE GRAY/BIGELOW, WHITE, JACKSON, AND THE WANG A.C.C. GONE!
...THE CRAZY NUMBERING SYSTEM ON SOME OF THOSE FLOORS THAT TOO WILL BE HISTORY!
YES, AND THAT'S NOT ALL...
?
YEA?
TO BE CONTINUED...
WATCH THIS SPACE

7 September 1989
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MGH HOTLINE UPDATE

What's happening

Sing for survival

Lend me your voices. The MGH Chaplain's Department will start a chorus for patients, families, and staff this fall. Beginning September 12, the chorus will meet Tuesdays at 5:30 pm at the MGH Chapel on the first floor of the Baker Building.

Under the direction of Suzanne McAllister, an accomplished musician and choral director, the group will perform a broad repertoire of simple and challenging pieces ranging from folk to classical to Broadway show tunes.

For more information contact Chaplain Phillip King, Director, MGH Chaplain's Department, at 726-2221.

Gift shop gold rush

Don't miss a golden opportunity. The MGH gift shops will hold a gold jewelry sale Thursday and Friday, September 21 and 22.

Study on panic disorder and medication needs volunteers

The Anxiety Research Unit is studying a number of methods to help patients discontinue medication for panic disorder. People suffering panic disorder experience a sudden onset of anxiety with such symptoms as racing heart, chest tightness, tingling, lightheadedness, sweating, and the fear of losing control or dying.

Some patients who attempt to discontinue certain medications experience difficulty, including re-emergence of anxiety symptoms. At present, it is not clear whether this results from withdrawal from the medication or recurrence of the anxiety disorder itself.

Patients eligible for the study will receive intensive and expert evaluation and management with state-of-the-art treatment while they discontinue medication. For further information contact Samantha Meltzer at 726-3488.

Fair thee well

Employee Health Service is sponsoring a Health and Wellness Fair for employees on September 20 from 11:00 am - 4:00 pm in the Walcott rooms of the WACC. The fair will feature exhibits dealing with physical health, emotional wellness, and lifestyle. A variety of health, wellness, and safety professionals will cover topics such as nutrition, substance abuse, back injury, smoking, AIDS, car safety, and exercise.

Spaulding Walk-a-thon

Pediatric patients from Spaulding Rehabilitation Hospital will join with their families, doctors, nurses, therapists and friends in Spaulding's Fourth Annual Walk-a-thon on Saturday September 23rd. This event to raise money for Spaulding's Pediatric Unit will begin at 10:00 am. Walkers will meet at the hospital, tour the Esplanade and return for a barbecue lunch. For more information call 720-6645.

Fall Courses from Training and Development

Are you concerned about professional growth? You needn't worry, because Training and Development will offer a variety of workshops and courses for MGH employees this fall. A small sample of opportunities includes:

Frontline Leadership for Managers
English as a Second Language
Telephone for Non-Native Speakers
Spanish for Health Care Providers
Managing Your Time Assertively
Managing Cultural Diversity.

Call Training and Development at ext. 2230 for more information.

MGH HOTLINE

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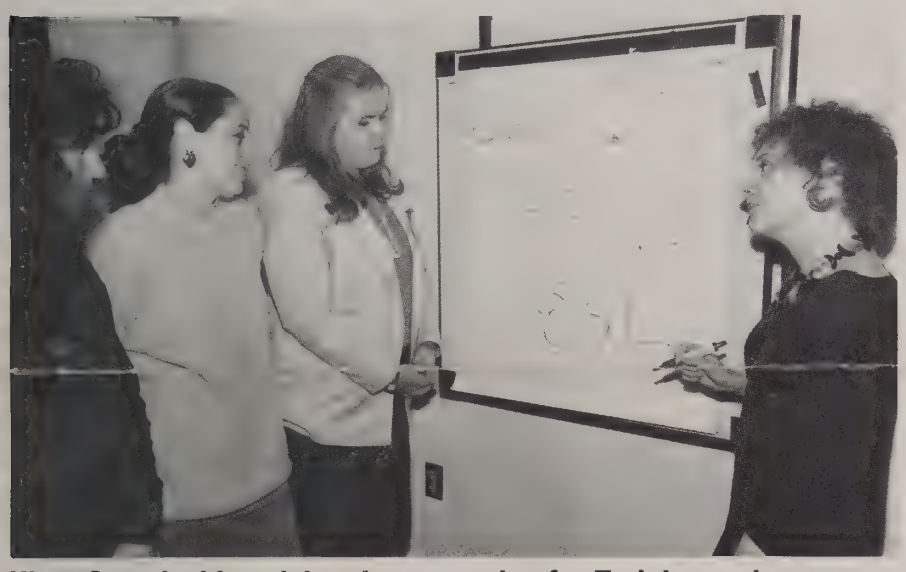
New program will help MGH employees get ahead

Our secondary school system is underfunded and overstressed. Yet half of the jobs created over the next ten years will require education beyond the high school level. Where will industry get workers with the skills needed to do the job?

The MGH has part of the answer. It's called development from within. The hospital is starting a work skills enrichment program that will address many of these issues by helping MGH employees grow professionally and personally.

"The new program, ***Working More Productively***, is designed to help employees be successful in their current jobs as well as advance within the organization," said Klara Sztucinski, Manager of Training and Development. "It will give them a wide range of options for realizing their potential. The organization will prosper as the employee prospers."

The program is divided into five components. The first, called *Basic Workplace Skills*, will enrich employees' reading, writing, and computation skills. And a segment called *Working!* will help employees develop interpersonal and leadership skills. *English as a Second Language (ESL)* and the *Adult High School Diploma Program* are components as well. And the *Tuition Reimbursement* benefit will help employees continue their education at the college level.



Klara Sztucinski explains the game plan for Training and Development's new program *Working More Productively*. From left are Laura Kacoyanis, Training Assistant; Anna Shine, Training Specialist; and Kathy Rice, Assistant Director of Human Resources.

Workplace Improvement Skills

To read the **Boston Globe** sports page requires the ability to read at the sixth grade level (the level at which most American newspapers are written). Yet 25 million adults in the U.S. cannot read at the fourth grade level. And another 30 million can't read at the ninth grade level.

"There are many people in skilled jobs who can't read at the fourth grade level. And there are some people who have done a good job of climbing the corporate ladder who are not as literate as they need to be," said Ms. Sztucinski. "However, this often makes them uncomfortable in many work situations."

Adults may have difficulty reading for a variety of reasons. A person's education may have been disrupted or inconsistent, or he might suffer from a learning disability such as dyslexia.

For instance, a recent article in the **Journal of Reading, Writing, and Learning Disabilities International** describes a 52-year-old contractor who was dyslexic. He had trouble telling the difference between letters and words. Yet this man had worked in the professional arena for many years—his reading problem completely undetected. After receiving instruction at a reading clinic for several months, he learned to read for the first time in his life.

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The MGH-Shiseido pact a funding milestone

The MGH forged in August an $85-million, 10-year research agreement with Shiseido Co. Limited, a Japanese pharmaceutical and cosmetic firm, to establish and help support a new dermatology research center. It is the largest funding agreement between a research institution and a corporation on record in this country.

Called the MGH-Harvard Cutaneous Biology Research Center, its aim is to become one of the world's foremost centers for research on the largest human organ: the skin.

"This is an exciting opportunity to get a running start into this critical area," said Dr. John A. Parrish, Chief of Dermatology at MGH and Chairman of the Department of Dermatology at Harvard Medical School. Dr. Parrish, who also directs the Wellman Research Laboratories, is the first Director of the Center, which will open in less than a year.

"Considering its importance," he said, "the skin is relatively neglected by the most modern capabilities of basic research. The skin is a vital, living organ that protects our body cells from a very unfriendly environment of ultraviolet A light, bacteria, toxic substances, and dehydration by air. It makes a major contribution to the vital regulation of our body temperature. And like other organs, it is heir to maladies ranging from the superficial to life-threatening cancer."

Through the newest techniques, the Center's primary goal is to gain better understanding of the skin. Later the mission will broaden to include finding improved ways to diagnose and treat skin disorders. Specifically omitted is clinical testing or development of commercial products.

When fully operative, the Center, which will be housed in Building 149 at the Charlestown Navy Yard, will employ about 100 scientists and support staff.

"The fruits of their studies will ultimately benefit people all over the world," said Dr. J. Robert Buchanan, MGH General Director. "More immediately, this Center will be a boost to the Massachusetts economy. New jobs and a major

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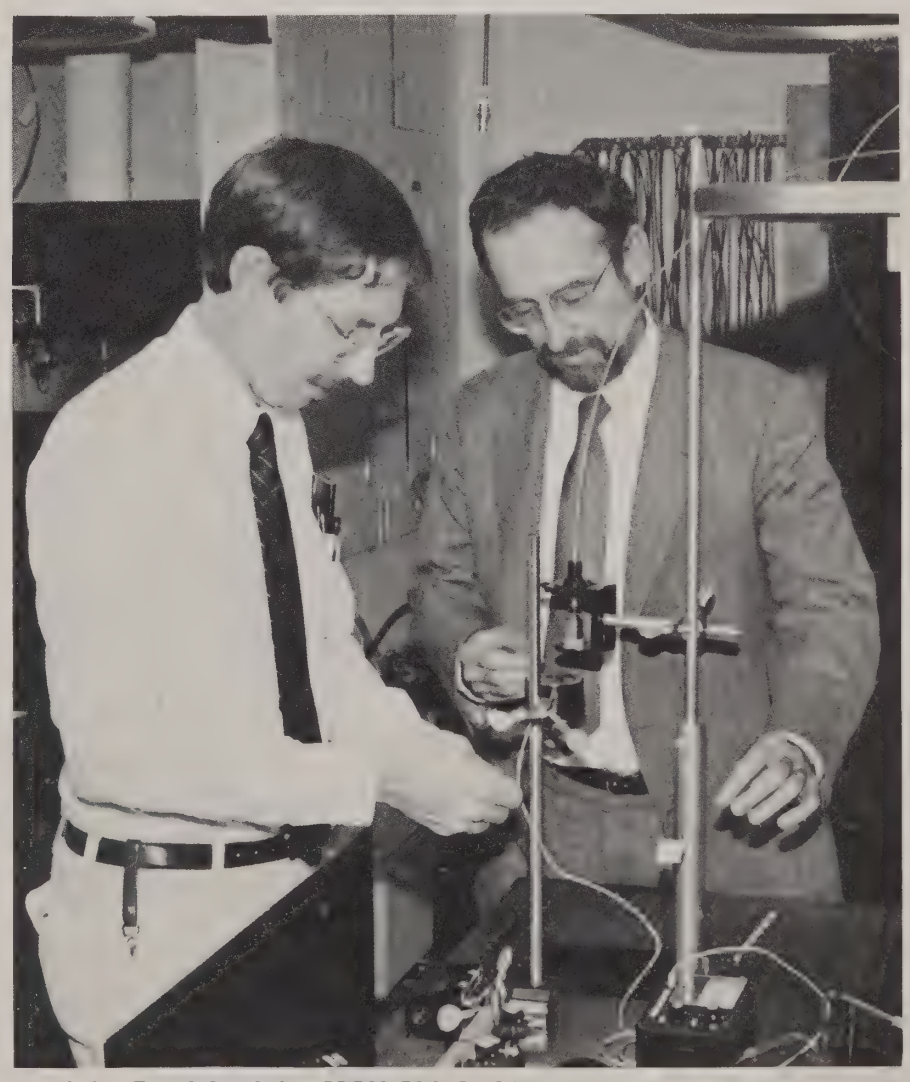

Dr. John Parrish, right, MGH Chief of Dermatology and Director of the new MGH-Harvard Cutaneous Biology Research Center (CBRC), works with Dr. R. Rox Anderson on a laser. The CBRC results from a 10-year, $85-million commitment from Shiseido Co. Limited, the Japanese cosmetics and pharmaceutical company. The agreement, signed last month in Tokyo, will put the MGH at the forefront of research on the skin.

Shiseido

from page 1

economic infusion will result. With the state's current fiscal problems, this major new funding will make a meaningful contribution."

Shiseido's thrust has been heavily on cosmetics rather than its pharmaceutical component. Over the years Shiseido has also supported research and scientific meetings to increase fundamental understanding of skin biology. With its major support for the MGH's newest center, Shiseido is trumpeting its desire to strengthen its pharmaceutical and basic research base. It is also taking the long view by its willingness to support fundamental research.

Under the agreement, the MGH will have the opportunity to patent inventions. Shiseido will have the right to license them and will pay the MGH royalties.

The new dermatology research center, which Dr. Parrish will direct, is another major way station along a scientific trail that began in the early 1970's when Dr. Parrish assembled a team that developed the technique still used around the world to fight stubborn, widespread, disabling psoriasis. PUVA combines a light-enhancing drug and ultraviolet A light to treat the incurable and intimidating disease.

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That treatment, through the husband of a pleased patient, led to a $15 million grant to build the hospital's Wellman Research Building. This was at the time perhaps the largest gift ever from an individual to a private American hospital. Subsequent gifts from Arthur O. and Gullan M. Wellman added several million dollars and created the Wellman Research Laboratories, which include what is probably the world's most complete biomedical laser research laboratory.

From that lab has come a stream of basic and applied research developments that have improved treatments or provided cures for urological and gastroenterological (GI) disorders as well as dermatologic problems. Now the Wellman Research Laboratories are engaged in such areas as cardiovascular studies and attempts to conquer internal cancers.

Both the Wellman grant and the one from Shiseido have been influenced by foundations laid by Dr. Thomas B. Fitzpatrick, MGH Chief of Dermatology from 1959 to 1987. It was Dr. Fitzpatrick to whom Mrs. Wellman originally came for treatment, and it was Dr. Fitzpatrick who

Home care company first in Boston to receive JCAHO accreditation

New England Health Resources (NEHR), the home care company jointly owned by Massachusetts General Hospital's Health Services Corporation and New England Medical Center's Community Practice Program, is the first Boston-based company to receive accreditation to provide home infusion therapy, durable medical equipment, and respiratory therapy. Accreditation was granted by the Joint Commission for Accreditation of Health Care Organizations (JCAHO).

Since its inception in 1984, NEHR has cared for more than 4,000 patients. NEHR nurses and therapists provide a variety of patient services including AIDS-related therapies, pain management, chemotherapy, intravenous feeding, and respiratory therapy. The company also supplies for home use medical equipment such as wheel chairs, walkers, and traction devices.

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Sue Flynn, RN, of New England Health Resources, cares for a patient in his home. Through a catheter implanted under the skin, this patient is able to administer his own intravenous medications. Ms. Flynn visits the patient each week to change the needle and apply a new dressing. Photo by Chris Maynard.

What's happening

Fine medical care calls for a fine wine

Jacques Wanner, a winemaker from Cramat, France, had given up hope. For many years he had experienced constant and debilitating pain in his legs, hands, and back. He had difficulty sleeping and taking care of daily responsibilities because of the incessant pain.

Mr. Wanner had a cyst on his spinal cord, and because of its location, physicians in France refused to operate.

Mr. Wanner heard through a friend that doctors at the MGH had successfully performed an operation to remove a tumor from a small girl's lower spinal region. In hope that these MGH surgeons could help him, Mr. Wanner came to Boston.

He arrived at the MGH unannounced. Unable to speak English, he was turned over to the capable hands of Margarita Battle, Coordinator of the Interpreter Service.

Ms. Battle enlisted the help of Leila Gupta, LICSW, Social Worker on the Anne Harte Psychosocial Unit of the Orthopaedic Tumor Service, who showed Mr. Wanner's magnetic resonance images to orthopedic surgeon Dr. Dempsey Springfield. Dr. Springfield referred the patient to Dr. Lawrence Borges, Head of the MGH Neurosurgical Spine Service and one of the surgeons who operated on Kitty Dukakis last year.

"We exposed the spinal cord in the back of the neck where the cyst could be seen best and inserted a plastic tube to drain the fluid from the cyst into the spinal fluid," said Dr. Borges. The procedure relieved the pressure, and Mr. Wanner reported that he was without pain for the first time in 25 years.

"I am really moved at the generosity of all of the MGH care givers involved," said Ms. Battle. "This team of people worked together to help Mr. Wanner. Both Drs. Springfield and Borges were very forthcoming in rearranging their schedules and taking the time to help him."

In Cramat, Mr. Wanner owns a vineyard and a successful champagne business. In appreciation of the care he received at the MGH he presented bottles of champagne to MGH care givers. To Dr. Borges he gave a large hand-painted bottle. In the photograph above he presents a vintage brew to Ms. Battle and Ms. Gupta.

The Winner is....

Mary de Alderette, Secretary in the Department of Radiology, won the department's logo contest last month. She is pictured here with Dr. James Thrall, Radiologist-in-Chief, and Christine Young, RT, Education Coordinator in Radiology. The logo contest was the brainchild of the department's Recruitment and Retention Committee of which Ms. Young is a member.

The logo will become the department's official insignia and will be placed on stationery and other written materials. The prize was a weekend in Nantucket.

HOTLINE

The librarians have new digs

They love the windows. And they love the space. With the expansion into the Bartlett Extension, the Treadwell Library will be a more pleasant and convenient environment for staff and patrons. When the expansion is complete it will consolidate the administrative offices and file rooms currently housed in Ruth Sleeper Hall with the rest of the library in the Bartlett Buildings.

The new entrance is on the first floor of the Bartlett Extension facing the WACC. "It's wonderful," said Jackie Bastille, Director of the MGH Health Sciences Library. "This makes the library much more accessible and more comfortable for the people who use it. Everybody who comes in here is absolutely ecstatic."

From left to right are: Jackie Bastille, Director of the MGH Health Sciences Library; Mary Linn Borsman, Information Services Librarian; and Information Desk Assistants Diane King (seated), Sue Gumb, and Martha Stone.

Not pictured are: Janice Scullin, Serials Librarian; Helene Leighton, Assistant Director for On-line Search Services; Ellen Westling, Assistant Director for Public Services; Beth Schneider, Assistant Director for Technical Services; and librarians Michael Blake, Carol Mankin, Margaret Michaud, and Susan Anderson.

A golden poet in her golden years

As we grow older, we hope at least for memories. For Carlotta Burn, an MGH patient, her's are of romance and violets.

The 82-year old poet was awarded this month the World of Poetry's Golden Poets Award. Her poem remembers a romance with a composer who brought her violets every spring. He died in 1981.

Ms. Burn, a patient of Dr. Cornelius Granai, Associate Director of Gynecologic Oncology, entered the poetry contest in March. "This [winning the award] was the highlight of my life," said Ms. Burn. "I'm sure that nothing this wonderful will ever happen to me again." The winning poem reads:

Violets

Sweet violets your
presence brings
Such happy thoughts
of other springs
A time when love
did weave a spell
All too wondrous
for one to tell
Oh happy times
my heart does yearn
If once again
you might return
Bringing sweet dreams
of yesterday
When violets bloomed
along the way.

Getting ahead

from page 1

Under the direction of Training and Development, instructors from the Community Learning Center in Cambridge will conduct classes at the MGH in reading, writing, and computation. Instruction will focus on skills-based learning by using curricula based on real professional and personal needs. For instance, in teaching computation an instructor might show an employee how to balance a checkbook.

"Skills-based training says that you learn a skill that is relevant and that you can incorporate immediately," said Ms. Sztucinski. "We want employees to leave the program knowing that they can do something they couldn't do before. This will enhance their self-esteem as well as develop their career potential."

Working!

Working More Productively will go beyond workplace basics to teach interpersonal and leadership skills. The segment called *Working!* will give employees, among other things, the skills to problem solve, negotiate, listen effectively, cope with change, and tackle new assignments.

"The ability to listen effectively and retain information; the ability to speak well; the ability to negotiate and problem solve—these are leadership skills," said Ms. Sztucinski. "You start to grow and develop them early on. You don't wait until you are a leader and then decide to develop them."

Carlotta Burn converses with Ellen McCarty, Administrative Assistant to Dr. Granai. Ms. McCarty, who also writes poetry, accompanied Ms. Burn to the awards ceremony in Washington, D.C.. More than 3,000 people attended the cermony. The entertainment included performances by Bob Hope, Mickey Rooney, and Donald O'Connor.

ESL and the Adult High School Diploma Program

Some say our labor pool is shrinking when in fact shifting demographics are challenging us to accommodate a more diverse work force. Toward this end *English as a Second Language* courses will continue to be offered at various levels. Ms. Sztucinski said that students who take these courses have a variety of needs. Some are literate in their native tongue but need to develop facility in English. Others may not read well in their native language.

"You may have people in this program who are highly literate in their native tongue," said Ms. Sztucinski. "Or sometimes they will need ESL and then reading because reading the English alphabet can be very difficult if you speak Arabic for instance."

Learning to learn

A theme which runs throughout many components of the program is learning how to learn. "When children are very small they have that natural inquisitiveness," said Ms. Sztucinski. "As people get older and are faced with social, political, and economic constraints, their priorities become supporting the children and making ends meet."

The objective as a trainer, said Ms. Sztucinski, is to find out what motivates a participant. "If it makes sense to them and they see results, they will buy into the process," she said. "You've got to be sensitive to what their needs are."

The MGH is in a service industry. And because people provide the services for which we are internationally known, they are the limited resource most in need of nurturing.

"To fill our work force needs, we need to rely on promotion from within," said Kathy Rice, Assistant Director of Human Resources. "With this program we are acting on our beliefs. It is very exciting to see a person limited by lack of skills be motivated to obtain those skills and be able to grow within the organization."

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Shiseido

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suggested that Mr. Wellman get acquainted with the exciting studies being undertaken by Dr. Parrish. And it was Dr. Fitzpatrick who some 15 years ago invited two Shiseido scientists to work in MGH dermatology laboratories.

In a precedent setting agreement eight years ago, Hoechst AG of West Germany gave the MGH $68 million over 10 years to establish and help support a Department of Molecular Biology. The Department has made several major findings of a basic research nature. The agreement came on the heels of the U.S. Government's decision to reduce its biomedical research support. With the government's announced reduction came a suggestion that academic institutions like the MGH seek industrial and foundation support to fill the gap. Since then industrial firms from all over the world have infused money into American academic research. Most MGH sources of industrial support are with American companies.

The Hoechst agreement also set a standard for preserving the traditional academic freedoms. In the Shiseido provisions the MGH also succeeded in protecting those freedoms: to decide what research to undertake, to determine the timing of research articles, and to choose the journal in which to publish results. Scientists will retain the right to collaborate freely with other colleagues.

"These academic cornerstones are ones we cherish, and Shiseido was very willing to accept such provisions," said Dr. Buchanan. The agreement also makes clear the Center will have to adhere to all regulations of the MGH, Harvard Medical School, and federal, state, and city laws.

Harvard Medical School and Shiseido will have advisory input into the research, but the final sole arbiter is the Director of the Center. As with Dr. Parrish, any future director would be an MGH staff member.

Shiseido is authorized under the agreement to have up to five scientists performing research at any time at the Center.

Said Dr. Parrish: "One driving force... [for the Center] is the desire to make a meaningful, powerful, and tangible difference in the prevention of skin disorders, the treatment of abnormal skin, and the maintenance of symptom-free normal skin of pleasing appearance. Another principal objective is to bring the level of research to a modern, sophisticated state so that dermatologic research in CBRC and elsewhere can both utilize and contribute to fundamental biomedical research in other disciplines...

"It is hoped and expected that a critical mass of prepared minds will create new solutions for old skin problems."

What's happening

from page 3

Ladies Visiting Committee hosts Tupperware sale

Need Tupperware, but too busy to attend a party? Jan Coffey, a former MGH employee Tupperware Manager, will be in the WACC Lobby Thursday and Friday, October 5 and 6, from 8:00 am to 5:00 pm. Fifteen percent of the total sales will be donated to the Ladies Visiting Committee to provide services to the hospital.

Tupperware has a lifetime guarantee. So bring your defective pieces to Ms. Coffey, and she will replace them free. You must pay for your orders when you make them, and the Tupperware will be delivered Thursday, October 12, in the WACC Lobby.

Workout with Physical Therapy

Beginning October 2, the Physical Therapy Department will offer a modified exercise program on Monday, Wednesday, and Thursday evenings from 5:30 - 6:30 pm in the Physical Therapy Gym on WACC 1. In addition to exercise, the 12-week program will include nutritional and postural education. Participants must obtain a referral letter from their physician, and applications are available from the Physical Therapy Department. The program costs $100.00. For more information contact Elizabeth Ratcliffe at ext. 2963.

Home care

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The accreditation assures patients and health care professionals that NEHR meets or exceeds nationally established standards of practice in all patient service areas. "That we voluntarily sought to be surveyed and accredited is a concrete indication of the company's commitment to quality care," said Ruth Fisk, General Manager of NEHR.

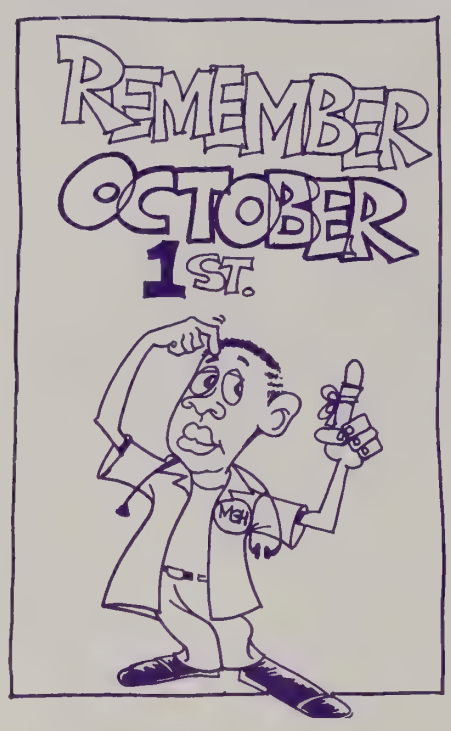
The JCAHO has been well-known in the health care field since the 1950's for its hospital accreditation program. The home care accreditation program was instituted in 1988 in response to the rapidly increasing number of patients who receive therapy in the home setting.

The survey process consisted of a two-day review by clinical representatives of the JCAHO including home visits with patients, interviews with staff and administrators, and an extensive review of clinical policies and procedures as well as patient records. Quality assurance, safety, and infection control were also assessed.

WHAT'S NEW IN NUMBERS

by Livingston Mclaren

Coming October 1st



Patients, visitors, and staff...

Will you know where to go on October 1st?

On **Sunday**, **October 1**, the MGH will renumber the floors in all buildings which have a floor 3A—the Wang Ambulatory Care Center (WACC) and the Gray, Jackson, Bigelow, and White Buildings. This will make the floors in these buildings match those in the new Inpatient Care Building.

The change will make it easier for patients, family members, employees, and visitors to find their way throughout the hospital.

Each floor above Floor 3 in the affected buildings will go up one number. When 3A becomes 4, then 4 will become 5, and so on.

Also, the hospital will begin a unified numbering system for rooms so that room 450 will be approximately above 350, etc. Currently, floors in the same building may have widely differing room numbering systems. So remember, if you are in the WACC, or the Gray, White, Jackson, or Bigelow Buildings:

- **Add one to floor numbers above 3 on October 1;**
- **Forget those old room numbers. They change, October 1.**

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William E. Walch, *Vice President for Resource Development and Public Affairs*

Martin S. Bander, *Director of News and Public Affairs*

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MGH HOTLINE

12 October 1989

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Bartlett 9, Extension 2206

Mr. Carl Niland, a cook in the White Building Kitchen, has his carbon monoxide level tested by Kathy McKool, RN, MSN. Carbon monoxide is eliminated from the lungs fairly soon after a smoker quits.

When Mr. Niland was first tested, his carbon monoxide level was 16 parts per million. By EPA standards, the maximum safe level is nine parts per million. At the time of this test, just two weeks after Mr. Niland had quit smoking, his carbon monoxide level had dropped to four parts per million.

Breaking the habit

Today, 3,000 young people will start to smoke. What they don't know is how hard it is to quit. Most Americans have heard the warnings. Smoking is the number one preventable cause of death in this country, accounting for 390,000 lost lives in 1985.

Nicotine is as addictive as heroin. Stroke, heart disease, emphysema, miscarriage, low birth weight babies, peptic ulcer disease, cancers of the mouth, pharynx, esophagus, lung, stomach, uterus, pancreas, kidney and bladder—all are related to or caused by the use of tobacco products.

Americans have gotten the message. And in fact, in the last ten years about 17.3 million smokers have tried to quit—again and again, and again and again.

"Our current treatment methods result in long-term abstinence in less than one-fourth of all smokers," said MGH Psychologist Dr. Nancy Keuthen. Dr. Keuthen and six other MGH researchers are exploring the use of an innovative drug therapy for smoking cessation. "The reason we are embarking on this research," she said, "is because there aren't that many treatment avenues that are effective. Traditionally, the ones that have worked best are behavior modification, hypnosis, and the use of nicotine gum. But one year after treatment in most programs, only about 20% of smokers stay abstinent."

Three strikes and you're in!

Despite dismal statistics, there is hope for quitters who have failed. "Most smokers make at least three attempts at quitting before they actually succeed," said Kathy McKool, RN, MSN, Director of the Cardiovascular Health Center's Quit Smoking Service. "People often think that because they went back to smoking that they failed. What they are really doing is gaining experience at quitting."

The smoking cessation program at the Cardiovascular Health Center provides comprehensive individualized evaluation and treatment for smokers who have made multiple attempts at quitting. Some of their treatment methods may include stress management, drug therapy, and easing withdrawal by slowly decreasing nicotine consumption. Dr. Andrew Littman is Medical Director for the Quit Smoking Service and Director of Behavioral Medicine at the Cardiovascular Health Center.

Nic-addiction

Nicotine reaches the brain within 7 seconds of inhalation—faster than heroin. It creates a

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Inside

High on the hog
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Ether Day is a day for employees

This Friday, October 13, the MGH will honor its employees, an MGH tradition, and a milestone in the practice of medicine. Ether Day will recognize MGH employees who have worked at the hospital for five years or more. Among those recognized will be three MGH employees who have given 60 years of service to the hospital: Dr. Marshall Kinne Bartlett, Senior Surgeon; and Honorary Physicians Earle MacArthur Chapman and Charles Lyman Short.

Ether Day is a reminder of the MGH role in developing the ability to perform "painless" surgery. On a Friday, October 16, 1846, MGH surgeons made the first public demonstration of the use of anesthesia in a surgical procedure. The operation on Edward Gilbert Abbott, a printer, to painlessly remove a tumor from his jaw, occurred in the domed amphitheater of the Bulfinch Building. The Ether Dome, as it is called, was used as an operating room from 1821 to 1867.

Our celebration of Ether Day also marks a long standing MGH tradition. On Ether Day in 1921 during the celebration of the hospital's One Hundredth Anniversary of its opening, Dr. Harvey Cushing referred to Ether Day as, "...one of the crystallized traditions which give an institution its particular individuality." This is the 94th celebration at the MGH of this day.

Dr. Buchanan will preside at the ceremony which will begin at 3:00 pm. Mr. W. Nicholas Thorndike, Chairman of the Board of Trustees, will be the guest speaker, and Thomas Rothwell, Vice President of Human Resources, will be the Master of Ceremonies. Names of the honorees will be read by Thomas Smith, RN, MS, Director of Intensive Care and Pediatric Nursing Services, and Trudy Reintges, Acting Director of the Computer Services Center. A reception will follow in the Walcott Rooms.

The Ether Day program, which will list the names of all of this year's honorees, will be posted on the Employee Information Bulletin Board across from the General Store. On Ether Day, employees

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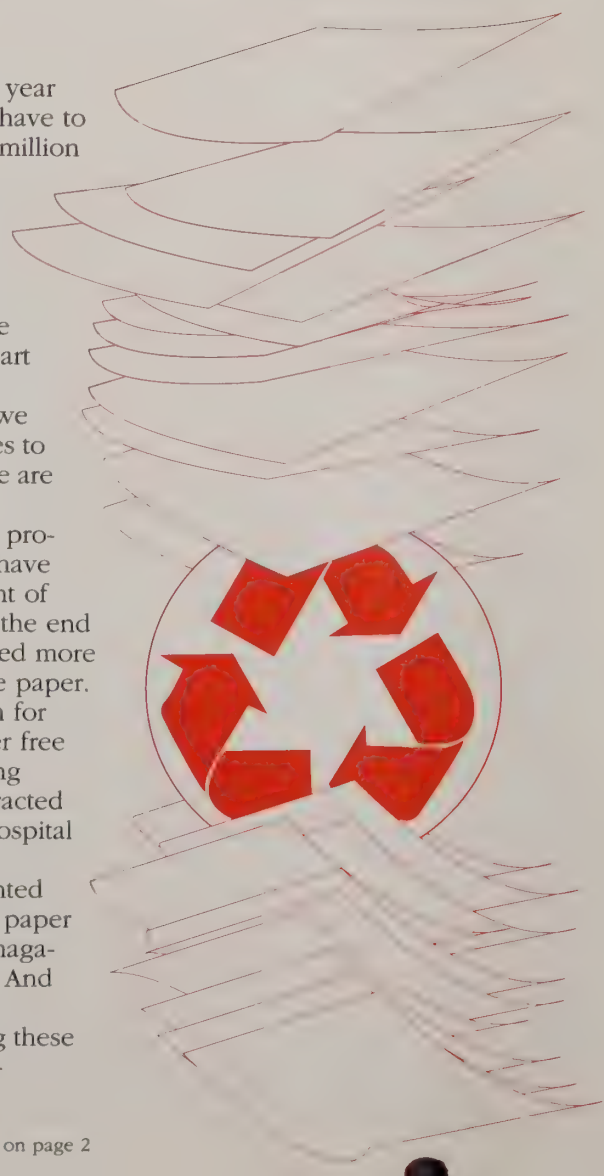
A recycling program that works



Consider these facts. By the year 2000, the United States will have to dispose of an estimated 107 million tons of waste. Landfill space is limited and decreasing. Disposing of our trash costs money. And hospitals continue to face fiscal crises.

It's time to take sides. Are you part of the problem or part of the solution?

As the amount of paper we recycle each month continues to grow, we can be sure that we are part of the solution.

Since the MGH recycling program began last spring, we have more than tripled the amount of waste paper we recycle. By the end of July, the MGH had recycled more than 21,000 pounds of waste paper.

So efficient is our system for producing high quality paper free of contaminants, the recycling company the MGH has contracted with has agreed to pay the hospital an extra penny per pound. Contaminants include unwanted items such as colored paper, paper clips, staples, cans, bottles, magazines, carbon paper, or tape. And MGH employees have done exceptionally well at keeping these and other items out of the recycling bins.

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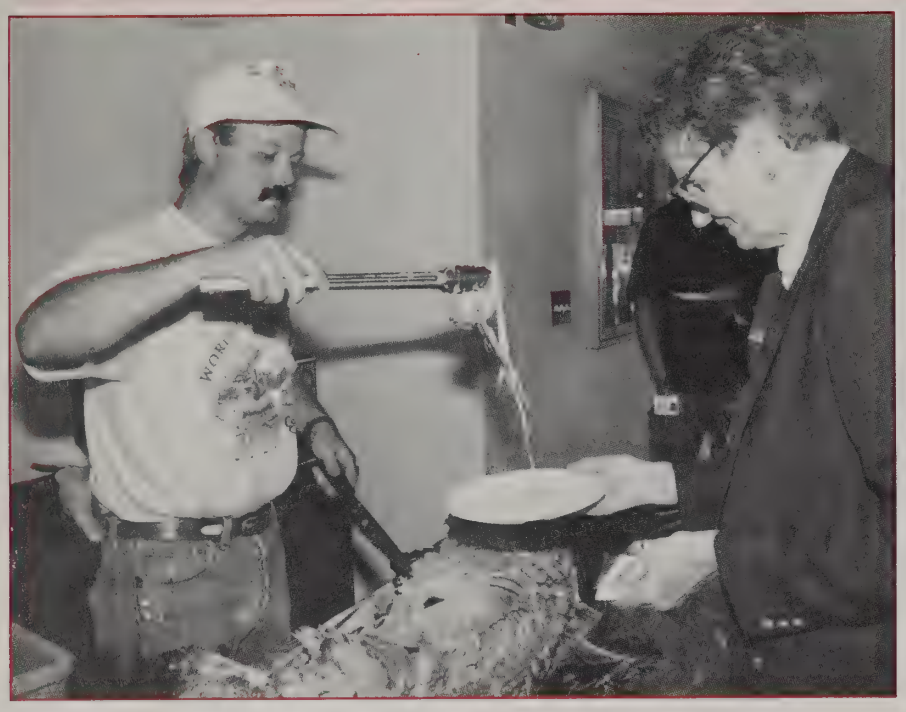

Championship barbecue chef Roger Wagner of Holly, Michigan served a southwestern delicacy to MGH employees last month. The MGH hosted a pig roast to celebrate the move to the Somerville Warehouse of the Medical Records, Purchasing, and Receiving departments. Mr. Wagner, who hails from Scottsdale, AZ where he co-owned a restaurant, is still known around the country as the Arizona Kid. He started making barbecue when he was 14 years old.

Feasting high on the hog

One Friday in September, the Arizona Kid rode into town. He wore cowboy boots, a Stetson hat, and he toted a loaded suitcase. He traveled with two metal tripods, pitchforks, and a fold-up six foot pole. He carried a plant misting bottle he would soon fill with beer, and small basting brushes. That equipment comprised the Kid's portable barbecue gear. He had come ready to tempt New England palates with the best of Southwest cuisine.

To formally announce the move to the Somerville Warehouse, Medical Records, Purchasing, and Materials Management hosted a barbecue pig roast at the new location. The Somerville Warehouse now houses the Receiving, Purchasing, and Medical Records departments.

Roger Wagner, the Arizona Kid, has won almost 20 awards for his barbecue. He had come to the MGH as one of the Project Managers from RMS Services, Inc. to assist with the year–long medical records conversion project. But when Mary Lahey, Director of Medical Records, heard of his culinary talent, she asked him to go whole hog for this event. Ed Santangelo, President of RMS Services arranged to send Mr. Wagner and his gear back to Boston to prepare the feast. Food preparation was coordinated by Susan Barraclough, Manager of Food Production and Services and Helen Doherty, Director of the Department of Dietetics.

To prepare the 110 pound pig, Mr. Wagner spitted it on a long pole and balanced it on two tripods creating a huge outdoor rotisserie. "I wrapped the pig in wire," said Mr. Wagner, "because after about ten hours of cooking, it gets so tender that if you don't have anything to support it, the meat falls apart."

Mr. Wagner cooked the pig for about 14 hours, constantly misting it with beer as he turned it on a spit over hardwood burned down to white hot coals. Mr. Wagner usually uses hickory or mesquite wood for barbecuing. But since neither was available, he made do with cherry. "The wood makes a big difference in the flavor," he said. "And the slower you cook the hog the more time it gives the smoke to permeate the meat and add flavor. I've taken up to 20 hours to cook a whole hog, because I get better flavor that way," he said.

There are many methods for barbecuing a pig. In some parts of the country, the pig is split in half, spitted, and fanned out. The meat is cooked above ground, the pig's nose facing the sky. Mr. Wagner says that it looks like a rotating butterfly.

Or you might dig a hole five feet deep, said Mr. Wagner. Burn wood in the bottom of the hole for several hours until it forms white coals. Cover the coals with rocks to hold the heat in.

The pig is wrapped in burlap bags or corn shucks soaked in beer and lowered into the pit. Protected from the coals by a screen of chicken wire and buried in leaves and dirt, the pig bakes to a succulent tenderness in its airtight grave.

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Recycling

from page 1

As a result, the MGH now sees a 10¢ return on every pound of waste paper it recycles. We save 4¢ per pound in disposal costs, and the paper company pays us 6¢ for each pound of waste paper we recover.

"Our system is very good, and we send them very clean, quality paper. This saves them processing on the other end," said Bill Banchiere, Director of Environmental Services.

Recycling bins have been placed in many departments within the hospital as well as in central locations like the mail room. When the bins become full, Environmental Services employees empty them, and the recycling company makes regular pickups.

There the paper is weighed, sorted, graded for quality, packaged, and sent to a paper mill. The mill mixes the recycled paper with water and chemicals in a hydropulper which acts like a huge blender. Ink, fillers, and other contaminants are removed. The mixture is then rolled out and dried on huge felt belts. The finished product is wound into rolls.

There is a growing demand for high grade waste paper. Recycled paper is this country's second largest export. We provide secondary fiber (paper recovered from sources other than trees) to many European countries which have few trees for harvest.

Ninety percent of recycled paper is used to make tissue products such as toilet tissue, and paper napkins and towels. Salvaged paper is also used in products such as cardboard, manila folders, and greeting cards.

"The most important part of the program is participation," said Mr. Banchiere. "It takes a little while to change habits, but people are pitching in. It's been very successful."

When a recycling program works, the paper gets a second life, our environment experiences less stress, and so do our pocket books. Because of the employees who care, the MGH has a program that works. *[Page 1 graphic by Arch McGinnis.]*

Smoking

from page 1

feeling of euphoria, relieves anxiety, and makes the smoker feel more alert. It is, however, highly addictive, said Surgeon General C. Everett Koop in his 1989 report.

Within a very short time it hooks you on a pleasurable sense of calm and well-being while feeding you the more than 4,000 chemicals found in cigarette smoke, 43 of which are cancer-causing agents.

"There is a nicotine addiction," said Ms. McKool. "People don't know that it's the addiction that's keeping them smoking. They think it's lack of will power or weakness of character. They blame themselves, and that's counter–productive."

Ms. McKool uses a technique called nicotine fading. Over the course of three weeks, she decreases the smoker's nicotine intake by 30% by prescribing cigarettes that are lower in nicotine. Once the smoker has quit, a physician might prescribe nicotine gum or other medications to minimize withdrawal symptoms.

Ms. McKool says that this approach is often confused with cutting down the numbers of cigarettes. "That's a big mistake," she said. "If you cut down to five cigarettes a day, those five cigarettes become so important. Your cravings will become much stronger. And instead of learning how to get rid of the urge, all you do is dwell on the urge."

Taking a long look

To quit successfully, the smoker must take a long look at the addiction. To help smokers examine their habit, Ms. McKool asks questions that help determine the level of addiction, why they smoke, and how smoking affects their health. One measure of degree of addiction is how soon a person lights up after waking. "If you light your cigarette

continued on page 4

Smoking is a habit that's not easy to put out.

HOTLINE

What's happening

Breast Health Awareness Day

One woman in ten will develop breast cancer. The American Cancer Society estimates that the tally for 1989 will be 142,000 new cases in this country. And by the end of this year, 43,000 women will have died from breast cancer.

To address these issues, health care professionals across the country have designated October as Breast Health Awareness Month. On Wednesday, October 25, the MGH Cancer Center and the Breast Imaging Division of the MGH Department of Radiology will host a Breast Health Awareness Day for employees and patients.

The Breast Imaging Division will sponsor an exhibit emphasizing the role of mammography in early breast cancer detection. In addition, representatives of the MGH Cancer Center will be on hand to explain the importance of breast self-examination. The exhibit will be located in the WACC Lobby from 11:00 am - 4:00 pm.

Soviet surgeons to visit MGH

Eight Soviet reconstructive surgeons will arrive at the MGH today to learn about advances in reconstructive surgery being made in the United States.

Dr. A. M. Borovikov, of the Soviet Union, will give a lecture titled "Microsurgery Reconstruction of the Lower Extremity" in the Ether Dome on Friday, October 13, from 5:00 pm - 6:00 pm.

Almost two years ago, six American plastic surgeons, including Dr. James W. May, Jr., Chief of the Plastic and Reconstructive Surgery and Hand Surgery Service at the MGH, visited Moscow and Leningrad to learn about Soviet surgical techniques. The visit by the Soviets resulted from that earlier exchange.

While in Boston, the Soviet surgeons will visit other Harvard teaching hospitals that have reconstructive surgery programs including: The Deaconess, Brigham & Women's, and The Beth Israel hospitals.

Tennis Anyone?

The time has come for all tennis aficionados to join the MGH Tennis League. The first meeting is Friday, October, 13, from 5:30 pm - 7:30 pm at the Charles River Park Tennis Club situated on the roof of the Lomasney Way Garage. During October a special rate has been extended to the MGH league. The league is open to everyone. Come by Friday night ready to play or observe. For more information call Phillip De[illegible] ext. 6136.

Kudos +1 for MGH Employees

This is a big hospital, and the floor and room renumbering that took place on October 1 was a big change. But true to the MGH spirit, it was smooth sailing. Thanks to all MGH employees who assisted with the logistics of eliminating floor 3A and renumbering floors and rooms in some MGH buildings. "MGH employees took a complex change and made it work," said Stephen Kauffman, Assistant General Director. "The renumbering affected every MGH employee, and the response was one of adaptability and camaraderie."

Memorial service for Robert Beh

A memorial Mass will be held for Robert Beh on Monday, October 16, at 1:00 pm in the MGH Chapel. Mr. Beh, an Assistant Radiation Safety Officer, had worked at the MGH for 15 years prior to his death in September. A reception for family, friends, and colleagues will be held in the Edwards Research Conference Room (Room 501) immediately following the service.

CPE graduates

Twelve students graduated from the summer Clinical Pastoral Education (CPE) course at the MGH. The fulltime CPE program is offered three times each year. Each segment of the course includes 400 hours of clinical training. "Many denominations require the course for students seeking ordination," said the Rev. Dr. Phillip King, Director of the Chaplaincy Department. "It is like an internship in ministry."

Many of the graduates will return to their theological seminaries to continue their studies. One student, an Episcopal priest, will continue in the program. Another graduate accepted a position as Chaplain at the Dana-Farber Cancer Institute, and a Roman Catholic priest who participated in the program returned to his home in Nigeria. The Clinical Pastoral Education program began in 1934. Through the inspiration of Dr. Richard Cabot, founder of the Department of Social Service, it was the first hospital-based training program for pastoral care.

(Right) Arthur Berman, a student at Harvard Divinity School, accepts his CPE diploma from Dr. Rick von Rueden, Deputy to the General Director. In the background are Helen Moore, Associate Chaplain Supervisor, and the Rev. Dr. Phillip King, Director of the Chaplaincy Department.

October is crime prevention month

To provide the best protection and service to the MGH community, the Department of Police and Security has instituted a Crime Prevention Program aimed at reducing theft and increasing security and safety awareness.

The initial phase of the program will focus on the Wang Ambulatory Care Center but will expand to the entire hospital by January 1, 1990.

The program consists of three components: Security Surveys, Operation Identification, and Education Seminars. A security survey is a physical examination of a work area or office to assess its vulnerability to crime.

Operation Identification, conducted in conjunction with the Boston Police Department, discourages theft by providing an easy way to identify lost or stolen items. The concept is to engrave or attach a nameplate with an identification number to valuable items. This number and a description of the item are registered with both the MGH Department of Police and Security and the Boston Police Department.

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Ether Day

from page 1

who have been with the hospital 5, 10, 20, 30, 40, 50, or 60 years will wear red carnations. Carnations will be available the morning of Ether Day, beginning at 7:00 am, in Mr. Rothwell's office on Bulfinch 2.

Five and ten year pins will also be available at that time. A representative from each department should pick up these items from Mr. Rothwell's office. If any department should need its pins prior to the morning of the 13th, please call Marion McCauley at ext. 2214.

Smoking

from page 2

within 30 minutes of waking, you are probably highly addicted," said Ms. McKool.

The half life of nicotine is two hours. This means that half of the drug is gone from your body within two hours. In another two hours another half of the remaining drug has been metabolized and so on. Within eight hours your body is depleted of the drug. "People sleep six to eight hours. By then their nicotine levels are extremely low," said Ms. McKool. "So upon waking, the highly addicted smoker must rebuild his nicotine level fairly quickly."

Ms. McKool also measures the smoker's carbon monoxide level to help personalize the health consequences of smoking and the progress being made. Residues of carbon monoxide are eliminated from the lungs fairly quickly after a smoker quits.

Quitting requires a hard look at the part cigarettes play in your life. "Smoking is like other addictions," said Dr. Keuthen. "When someone is dependent on a substance, it becomes interwoven into the fabric of their life. You have to have a cigarette to help you concentrate. You have to have a cigarette to relax. You have to have a cigarette with your coffee. There are many prompts in your environment that are saying that it is time for a cigarette."

Calling it quits

"I think the biggest stumbling block for people is they think that they have to want to quit with all of their heart before they actually try to quit," said Ms. McKool. "There will always be some ambivalence about the decision to quit."

Ms. McKool has several recommendations for people who want to quit smoking. Be prepared for cravings down the line. And learn now how to cope with stress and anxiety. "We believe that anxiety is one of the major reasons why smokers relapse," said Dr. Keuthen, who is also Instructor in Psychology at Harvard Medical School.

The research suggests that smokers may use cigarettes to treat certain mood states like anxiety or depression. In this case, anxiety that might appear after withdrawal symptoms have ended may simply be the recurrence of a preexisting condition. And when confronted with this anxiety, the smoker often relapses to old ways of coping.

Ex-smokers also must deal with friends and family members who still smoke. In fact most smokers break abstinence with a cigarette they borrowed from someone else.

Preparation is the key. Think ahead of time about the difficulties that might occur and about the change in life-style that quitting requires. "People think they can just wake up and say 'I'm quitting today,'" said Ms. McKool. "That doesn't work; you have to prepare for quitting.

"The majority of people can quit on their own and will quit on their own. But they need to recognize when it is stronger than they are."

There is help right here

Drs. Keuthen, Owen Surman, Lee Baer, Jerrold Rosenbaum, Nancy Rigotti, David Gastfriend, and Stewart Reiter are investigating the use of drug therapy in smoking cessation treatment. They will combine this psychopharmacological approach with more traditional behavior modification techniques. For more information on this study contact Chris Murphy, the Smoking Study Coordinator at ext. 1654.

For more information on the Cardiovascular Health Center's Quit Smoking Service, call Kathy McKool at ext. 3475.

As well, Employee Health runs smoking cessation programs for employees. Call ext. 1625 for more information.

And don't forget November 15 is the American Cancer Society's *Great American Smoke-Out.* Employee Health will coordinate the *Adopt A Smoker* program which will encourage MGH nonsmokers to help a smoker quit for a day.

Self-help for smoking cessation

If you want to go it on your own, these resources might help:

Freedom from Smoking for You and Your Family

by The American Lung Association, Free from the MGH Employee Health Service.

Employee Health suggests you make a one-hour appointment so that they can instruct you in the proper use of the book. The book uses quitters' real life experiences and suggests ways to involve a support person. For more information call the Employee Health Service at ext. 1625.

Quit Smart: A Guide to Freedom from Cigarettes

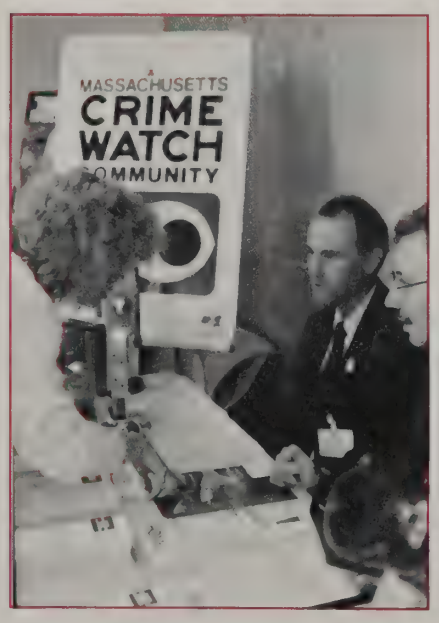
by Dr. Robert H. Shipley, price $12.98
This pocket-size book addresses the use of nicotine gum and nicotine fading. The module includes a self-hypnosis audiocassette and other cessation materials.

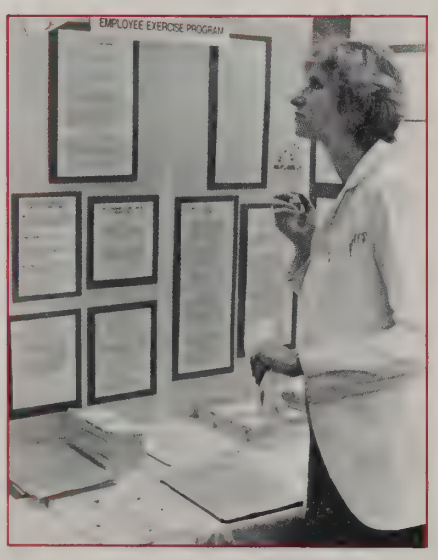
Free and Clear: A Guide to Quitting Smoking on Your Own

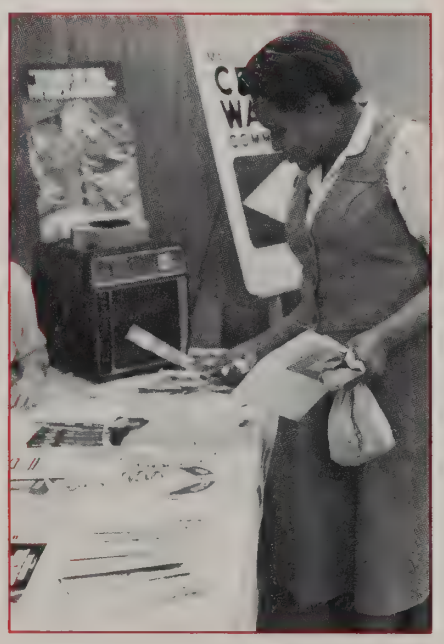
by Dr. C. Tracy Orleans, price $30.00. The book features detailed instructions on nicotine fading. It also contains information on how to involve a support person. A copy can be purchased from the Cardiovascular Health Center. Call Kathy McKool at ext. 3475.

MGH employees take care of each other and themselves

More than 300 MGHers attended the health and wellness fair sponsored by Employee Health Service last month. The fair featured 23 exhibits by MGH departments addressing issues such as personal safety, nutrition, exercise, smoking cessation, stress reduction, and AIDS. Photos by Jill Rader.







Pig roast

from page 2

Real barbecue doesn't need sauce. The flavor comes from the smoke, the meat, and the seasonings. However, a good sauce can be the coup de grace. Barbecue sauces typically consist of ketchup or tomato paste, brown sugar or molasses, and spices. Mr. Wagner's sauce is reddish-brown, of medium consistency, and slightly sweet. Delicious! His recipe? (Sugar, tomato, and spices of course.) The Arizona Kid has to keep some secrets.

What's happening

from page 3

Education Seminars will focus on safety and security issues. Speakers will address MGH employees on topics such as hospital policy, assault awareness, office theft prevention, and home security. The Crime Prevention Program is administered by trained personnel from the MGH Department of Police and Security. Several security officers have received certification as Crime Prevention Practitioners from the Massachusetts Criminal Justice Training Council. The goal of the program is to promote a crime-free work place at the MGH. For more information call ext. 2121.

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William E. Walch, *Vice President for Resource Development and Public Affairs*

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Bartlett 9 / Extension 2206

MGH HOTLINE UPDATE

MGH-United Way Drive Begins

Today begins the United Way campaign. Last year more than 1,500 MGH employees donated a record $142,092 to the United Way. And part of that money came back home.

Now through a new program called Partners i*n Caring* part of what we raise is donated to the MGH Department of Social Service. If we raise more than we did last year, the hospital will receive 25% of the additional funds. And as the amount we raise goes up, so does the percentage the United Way donates to the hospital.

Because of an exemplary fund-raising effort in 1988, the Social Service department received more than $6,000 from the United Way. These monies will go to assist MGH patients and their families.

For instance, donations helped the Social Service department rent wheelchairs for patients whose insurance did not cover such equipment. A little girl with multiple sclerosis spent two weeks at a summer camp for children with special needs, thanks to the department's fund. And when a retired MGH employee needed a new prosthesis, Social Service chipped in.

"We hope to inform the MGH community about the United Way and how it really helps people—the homeless, the hungry, and those afflicted with AIDS," said David Masters Vice President of Administration for the MGH Professional Services Corporation and United Way fund-raising coordinator this year. "In this way, we hope to encourage employee participation in the United Way campaign."

The United Way fund-raising effort at the MGH will feature a drawing on November 17. As well, the hospital will host a complimentary breakfast for employees at the MGH main campus on November 8, and continental breakfasts at the Somerville Warehouse, the Navy Yard, 15 River Street, and the Revere Health Center between November 2 and 7.

Characteristic of MGH United Way fund-raising drives in the past, this one should provide a healthy dose of fun. New England Patriots defensive end Garin Veris will sign autographs at the breakfasts at Charlestown, Somerville, and the main campus. The November 17 drawing will run from noon - 12:30 pm in the General Cafeteria, and prizes will include a get-away weekend in Montreal, Celtics and Bruins tickets, an MBTA pass, one month free parking at the MGH front garage or at MGH East, Patriots tickets, and gift certificates to the MGH Flower Shop and Gift Shop.

Pledge cards, which will also act as entry forms for the drawing, will be distributed with paychecks on October 26. Departmental volunteers will collect pledge cards and return them to Mr. Masters' office or to the designated boxes in payroll by November 10.

The United Way of Massachusetts Bay supports more than 200 agencies that provide needed services to people who live in the more than 80 towns and cities in the Massachusetts Bay area. Some of the United Way's priorities for the $52 million they hope to raise this year are child care, education, employment, housing, health care access, substance abuse, and AIDS. With federal cuts in human services funding and the state's budget crisis, these funds are sorely needed. The MGH effort can make a difference.

United Way-sponsored agency helps woman escape battering

from David Masters

At the October 11 meeting of the United Way departmental volunteers, Rosella Jones told of her personal ordeal as a battered woman and how Transition House, a United Way-funded agency for battered people, supported her independence and self respect. It was such an emotional story that we thought we'd share it with everyone.

After 11 years of marriage, her husband, a man of high standing in the community and of substantial wealth, turned into an emotionally disturbed alcoholic. His repeated attacks and beatings ended in numerous hospitalizations for Ms. Jones. On one occasion, after she was discharged from the hospital following treatment for a broken arm and many contusions, he rebroke her arm,

continued on back

HALLOWEEN
safety tips on back

The United Way helps make a special friendship

Unlike most kids, 7-year-old Julie Brown has her own guardian angel.

Born with spina bifida, Julie has spent much of her young life in a wheelchair. She doesn't know what it is like to ride a bike, kick a ball, or play tag.

"About a year ago, I noticed Julie becoming very depressed and nervous," said her mother Ann Brown. "She wasn't acting like herself."

The young girl's personality quickly took a turn for the better upon meeting her savior, 25-year-old Martha Donaghue, who became a quadriplegic seven years ago after sustaining an athletic injury during her senior year as captain of the gymnastics team at North Quincy High School.

Ms. Donaghue and young Ms. Brown, both of Quincy, became best friends through Partners for Disabled Youth (PDY), Inc., a Boston-based, nonprofit organization which arranges one-to-one relationships between adolescents and children with disabilities and adults who have similar disabilities.

"Martha and Julie hit it off right away," said Maureen Gallagher, program specialist at PDY, one of 11 new agencies to receive membership into the United Way of Massachusetts Bay family this year. "Martha is a perfect example of someone whom Julie should follow."

Ms. Donaghue and Ms. Brown, a first grade student at the Lincoln-Hancock Elementary School in Quincy, usually spend every other weekend together. "One of my favorite things is to go over to Martha's house and bake chocolate chip cookies," said Ms. Brown. "The only problem is that Julie eats them as fast as she makes them," laughed Ms. Donaghue, a 1987 summa cum laude graduate of Boston University, who works as an actuarial assistant at John Hancock Mutual Life Insurance Company in Boston.

Ms. Donaghue's positive attitude seems to have rubbed off on Ms. Brown, who now takes swimming and ballet lessons.

"Martha is like a big sister to me," said Ms. Brown. "I want to be just like her when I grow up."

HALLOWEEN CAN BE A TREAT IF YOU FOLLOW THESE TIPS.

For those of you who have children or who will be trick-or-treating on your own this Halloween, here are some tips from the MGH Department of Police and Security to help ensure a safe adventure:

Accompany children, and make sure they can see well through face masks.

Wear light-colored clothing short enough to prevent tripping, and add reflectors to be visible if still out in the evening.

Start out in daylight, but carry a flashlight in case of delay.

Stay within the neighborhood, and only visit homes of people you know.

Watch for traffic.

Only accept wrapped or packaged candy.

Examine candy before allowing children to eat it.

Have fun!

Battered woman

from page 1

tied her to a chair, and slit her arms with a razor.

A few months later, he knocked her unconscious, tied and gagged her, threw her in the back seat of his car that was parked in the garage, locked the door, turned the engine on, and left her to die. Fortunately, she was discovered by her mother-in-law and rushed to the hospital.

Several times Ms. Jones turned to the courts for help, but the courts considered this a domestic quarrel and would not intervene. Her sisters suggested that her comfortable life-style was worth a few slaps. Realizing that she must escape, Ms. Jones went to a bus station and came to Boston. She arrived not knowing any one, not having any clothes or food, and with only $10 in her pocket.

After finding her way to Transition House, Ms. Jones received the comfort, support, and encouragement of the dedicated staff. They provided food and shelter until Ms. Jones could become self-sufficient. Transition House helped Ms. Jones regain her self-confidence and respect.

Ms. Jones, a clinical psychologist, never thought that she would be in such a predicament. Today, she works at Transition House and volunteers to support the United Way. She is just one of many battered women and men, all with tragic lives, who with the help of agencies supported by the United Way will be given hope, love, and life. Is that so much to ask for?

What's happening

Just 60 shopping days until Christmas

The Ladies Visiting Committee will sponsor a costume jewelry sale on Friday, October 27 and a gold jewelry sale on Thursday and Friday, November 2 and 3. Both events will take place in the WACC Lobby from 9:00 am - 5:00 pm.

MGH HOTLINE

9 November 1989

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Fiscal pressures force wage freeze

The MGH wage freeze dominated last month's Town Meeting where Dr. J. Robert Buchanan addressed a somber crowd. Over the last months we have watched the Massachusetts economy deteriorate, and the shifting emphasis in federal and state funding have caused tremors to ripple throughout the health care industry.

Yes the mood was somber. But there was also resignation because MGH employees have watched fearfully the series of layoffs along Route 128 and elsewhere in the state. Fortunately for the MGH, this was not the "big one." Yet for some it was a *temblor* that can hardly be ignored.

At the end of fiscal year 1989, the MGH had a deficit of $12 million. (See sidebar story on page 4). After the application of "rainy day reserves" and unanticipated income, the MGH was left with a $3 million deficit. Administrators anticipate being $20 million in the hole at the end of the current fiscal year that began on October 1. Again the hospital will apply reserves, but for the last time. Because by then, even our applicable reserves will have dried up.

As a result, a significant reduction in spending (beyond what we have already done) was inevitable. But employees were relieved that the cuts didn't result in layoffs. If they had, we could have lost 400 MGH employees. "We made the decision to freeze salaries and wages because in order to effect a savings through a layoff, we would have had to lay off about 400 people," said Dr. Buchanan. "In this job market, it would be a terrible blow."

MGH administrators considered other options to deal with the budget difficulties. For instance, Dr. Buchanan reported that another Boston teaching hospital had given a small increase to the work force but at the same time increased the employees' contribution to the health insurance premium to 30% of the cost. "We looked at that," said Dr. Buchanan, "and we discarded the idea because it looked like we would be giving with one hand and taking away with the other."

In fact, had the hospital resorted to that solution, employees might have lost more than they gained. Employees don't pay taxes on the money the hospital contributes for the health insurance premium. For the employee, this is like tax-free income. If employees had to pay a larger percentage of their premiums they would have to do so with after-tax dollars. The share of the premium would go up, and taxes would shrink the size of the dollar used to pay that bill.

The crowd expected a somber message, and Dr. Buchanan did not try to paint a bright picture. He pointed to a shift in federal support away from health care and away from emphasis on urban hospitals. "As I look down the road...I am not really optimistic about the future getting suddenly better," said the General Director. "The catastrophic health care bill is in big trouble (the bill was defeated in the House and

continued on page 4

Dr. Buchanan reads a letter from an MGH employee at last month's Town Meeting. The General Director addressed the writer's concerns and explained the reasons behind the wage and salary freeze.

The MGH Physician Referral Service spells relief

Because we are known around the world and patients who want quality care come knocking at our door...

Because it can take six to twelve weeks to get an appointment with some MGH physicians...

Because we seem too big, unwieldy, and overwhelming to the new patient trying to find a doctor...

Because patients who want care at the MGH sometimes go elsewhere as a result...

Because our own physicians have trouble getting consultations with their busy colleagues in certain specialties...

Because our financial survival depends upon helping more people utilize our inpatient, outpatient and diagnostic services...

These are all reasons we must deal with the issue of access—the ability of the MGH to handle increasing demand for its services.

In January 1987, the MGH Staff Associates formed the Subcommittee on Access, chaired by Dr. James McFarland, Associate Physician in Medicine at the MGH. The committee recommended the establishment of a physician referral service in its report to the General Executive Committee.

"The committee [on access] started because of the interest of many people in the hospital in improving access," said Dr. McFarland. "One of the functions of the MGH Staff Associates is to ensure access to patient care services. And that is what led us to try to come up with a solution."

A major part of that solution is the MGH Physician Referral Service, which opened its doors officially last month. The service is headed by Regina Buckley and under the umbrella of the Professional Services Corporation. "The aim is straightforward," commented Ms. Buckley, "It is to handle requests for physicians at the MGH."

Referral coordinators Nancy Albanese and Mimi O'Leary triage calls from potential patients, community physicians, and MGH physicians seeking to refer their patients to other MGH care providers. They use a state-of-the-art computer database that matches a patient's needs with available health care professionals. MGH physicians voluntarily participate in the program by returning a questionnaire to the referral office detailing their clinical specialties and their availability for appointments.

Picture this scenario. A potential patient calls an orthopedist complaining of back pain. But her symptoms, said Dr. Frederick Ackroyd, an MGH surgeon, could point to metastatic breast cancer.

The wait to see an MGH orthopedist for back pain can stretch to three months. If this patient suffers breast cancer, she may need an answer right away. A referral coordinator might first suggest she see an internist. Whatever the patient's choice of physician, timely treatment could be crucial.

The referral coordinators cover all bases and, among other things, help to ensure that the patient sees the appropriate MGH physician. "A patient might call asking for a cardiologist," said Ms. Buckley. "We will first ask what the pain is like, has it

continued on page 3

From left are referral coordinators Mimi O'Leary and Nancy Albanese, and Manager of the Physician Referral Service Regina Buckley.

Inside

Ether Day service-pin awardees page 2

Business Journal rakes hospitals page 4

SERVICE PIN AWARDS — 1989

In recognition of service

FOR SIXTY YEARS

Marshall K. Bartlett, *Surgery*
Earle M. Chapman, *Medicine*
Charles L. Short, *Medicine*

FOR FIFTY YEARS

Daneil S. Ellis, *Medicine*
Francis D. Moore, *Surgery*
Arthur S. Pier, Jr., *Medicine*
John T. Quinby, *Medicine*

FOR FORTY YEARS

Gordon L. Brownell, *Radiology*
Franklin Carter, *Psychiatry*
John A. Duggan, *Pediatrics*
John H. Lamont, *Psychiatry*
Farahe Maloof, *Medicine*
Vernon H. Mark, *Neurosurgery*
Lawrence E.Martin, *Administration*
Lot B. Page, *Medicine*
Guillermo C. Sanchez, *Medicine*
Boris Senior, *Pediatrics*
Walter T. St. Goar, *Medicine*
Bartlett H.Stone, *Gynecology*
Morton N. Swartz, *Medicine*
Austin L. Vickery, Jr., *Pathology*

FOR THIRTY YEARS

William J. Adelson, *Pediatrics*
Donald J. Annino, *Pediatrics*
Peter Antonelli, *Maintenance*
Howard P. Baden, *Dermatology*
George E. Battit, *Anesthesia*
Patricia H. Beckles, *Nursing*
Ethel Cakounes, *Radiology*
Sally L. Cave, *Recreational Therapy*
Lillian S. Cosman, *Medical Records*
Beryl E. Culbert, *Admitting/Billing*
William L. Curwen, *Dermatology*
Richard A DiTrapano, *Computer Center*
G. Richard Dickersin, *Pathology*
Robert E. Dinsmore, *Radiology*
Robert Fienberg, *Pathology*
Thomas B. Fitzpatrick, *Dermatology*
Nicola Galante, *Maintenance*
Ida B. Giriunas, *Neuro-Clinical Labs*
George A. Glines, *Pediatrics*
John E. Goodman, *Dietetics*
Murray L. Janower, *Radiology*
James Johnson, *Dietetics*
William L. Kermond, *Orthopaedics*
Ida D. Leone, *Cytogenetics Lab*
Herbert O. Levine, *Psychiatry*
John B. Little, *Radiology*
Richard J.Michaud, *Credit & Collection*
Donald M.Muirhead, *Pediatrics*
Eileen P. Mullin, *Orthopaedic Workshop*
Sophie Natowski, *Bacteriology*
Paul F. J. New, *Radiology*
Alfred E. Phaneuf, *Admitting/Billing*
J. Henry Stempien, *Oral Surgery*
Phillip R. Sullivan, *Psychiatry*
Elsie M. Sylvester, *Pathology*
Alfred D. Weiss, *Neurology*
Peter M. Yurchak, *Medicine*

FOR TWENTY YEARS

Robert S. Abernethy, III, *Psychiatry*
Theresa L. Adjan-Vallen, *Nursing*
Matibelle R. Allen, *Dietetics*
Anne W. Alonso, *Psychiatry*
Carolyn S. Anderson, *Nursing*
Bernard R. Askeroff, *Medicine*
Joseph Avruch, *Medicine*
Ross J. Baldessarini, *Psychiatry*
Manya M. Barnett, *Nursing*
Roger A. Bauman, *Radiology*
Margaret E. Lang Bauman, *Pediatrics*
Jeanine Belizaire, *Clinical Administration*
Carmen, Z. Belle, *Materials Management*
Jennie A. Bering, *Blood Transfusion Services*
Donna R. Blakely, *Nursing*
Fred J. Bonk, *Biomedical Engineering*
Ralph J. Bouvier, *Environmental Services*
Marianne L. Bower, *Dermatolgy*
Sandra Boyd, *Clinical Administration*
John Bufford, *Environmental Services*
Daniel F. Burdick, *Materials Management*
Daphne R. Burgess, *Clinical Administration*
Helene C. Burrows, *MGH Surgical Associates*
Ruth A. Burrows, *Nursing*
Pauline M. Buszkiewicz, *Social Service*
Michael H. Byrne, *Arthritis Unit*
Janet E. Cannon, *Nurisng*
Louisa Cardillo, *Radiology*
Claudia C. Carpenter, *Social Service*
Lynda M. Carpenter, *Radiology*
Diane L. Carroll, *Surgery*
Enrique Castillo, *Environmental Service*
Elizabeth Cerasuolo, *Dietetics*
Merry H. Chames, *D.R.G. Analysis*
Charles T. Claydon, *Surgery*
Lorraine M. Concannon, *Radiology*
Nancy E. Coolberth, *Blood Transfusion Service*
Judy T. Cote, *MGH Surgical Associates*
W. Robert Courey, *Radiology*
Kathleen E. Creedon, *Dietetics*
Chrysosto Dabreo, *Surgical Research*
Anne A. Daniels, *Social Service*
Rosa Davis, *Neuro Medical Clinic*
Zareh N. Demirjian, *Medicine*
Alvin G. Denenberg, *Cardiovascular Lab*
Marianne Desrosiers, *Environmental Services*
Margaret M. Ditrapano, *Cardiovascular Lab*
Margaret V. Donovan, *Clinical Administration*
Isabell Drakes, *General Medicine*
Lambertus J. Drop, *Anesthesia*
Mary F. Dull, *Radiology*
Nellie W. Eaton, *Nursing*
Sherry Edson, *Nursing*
Joan M. Elkin, *Hematology*
Peter I. Elmuts, *Central Accounting*
Helen Ertsos, *Chemistry*
Mary L. Farrell, *Kidney Dialysis Unit*
Joseph Field, *Dietetics*
James D. Fitzgerald, *Maintenance*
Warren E. Foote, Psychiatry
Barbara A. Forziati, *Nursing*
Mary A. Frangiosa, *Charlestown Project*
Karen Gacicia, *Ambulatory Care Administration*
Edna L. Gavin, *Nursing*
Evelyn Gaynor, *Environmental Services*
Helen M. Geezil, *General Store*
Pauline Geleas, *Admitting/Billing*
Sidney Gentle, *Environmental Services*
Ailene R. Giglio, *Communications*
Vicenta Gilcruz, *Materials Management*
Thomas H. Glick, *Neurology*
R. E. Godlewski, *Nursing*
Herman K. Gold, *Medicine*
Naomi V. Gray, *Clinical Administration*
Joel F. Habener, *Medicine*
Paul E. Hagen, *Security*
Harley A. Haynes, *Dermatology*
Alice F Headley, *Radiology*
Michael K. Hennessey, *Cardiovascular Lab*
Elizabeth A. Hennessey, *Charlestown Project*
Ben J. Hester, *Materials Management*
Ann E. Hewett, *Urology*
Martin S. Hirsch, *Medicine*
Edward P. Hoffer, *Medicine*
Mary C. Howell, *Pediatrics*
Christians Husbands, *Dietetics*
Ralph S. Hynes, *Radiology*
Carol A. Imposimato, *Fernald School*
Eleanor G. Irving, *Information*
Franklin D. Jackson, *Dietetics*
Lee B. Jacoby, Neurosurgery
Clarita R. James, *O.R. Administration*
Gwendolyn E. Jemmison, *Environmental Services*
Marva Johnson, *Urology*
Joanne M. Joyce, *Nursing*
David E. Kaufman, *Physics Research*
Yung S. Kim, *Pharmacy*
Susan Kimble, *Clinical Administration*
Richard J. Kitz, *Anesthesia*
Ira Lable, *Psychiatry*
Richard E. Land, *Radiology*
Louise M. Lane, *Nursing*
Susan H. Laramee, *Dietetics*
Sandra L. Latham, *Gyn Associates*
Robert P. Leslie, *Bio-Medical Tech Support*
Paula B. Lutzin, *Warren Library*
John Maciaszczyk, *Security*
George D. MacNeil, *Biomedical Engineering*
Jonathan R. Maghakian, *Clinical Administration*
Anne T. Malloy, *Blood Transfusion Service*
Robert A. Mancuso, *O.R. Administration*
Robert W. Mann, *Orthopaedics*
Dorial E. Mason, *Radiology*
Herbert O. Mathewson, *Pediatrics*
James W. May, Jr., *Surgery*
Ellen M. McKinnon, *Nursing*
Teresita Z. Mendoza, *Chemistry*
Sarah G. Millar, *Nursing*
Roslyn R. Morris, *Neurophysiology Lab*
Jean M. Nardini, *Kidney Dialysis*
Judith A. Newall, *Nursing*
Janice A. Nicosia, *Cardiac*
Theresa M. O'Brien, *Nursing*
Susan O'Leary, *Nursing*
John E. Ohliger, *Radiology*
Arthur N. Papas, *Psychiatry*
Stephen W. Parker, *Neurology*
John A. Parrish, *Dermatology*
Kathryn J. Pazola, *Nursing*
Charlane J. Pehoski, *Fernald School*
Aurora L. Perez, *Chemistry*
Joanne M. Peters, *Nursing*
Inna Priede, *Hematology*
Edwin L. Prien, Jr., *Medicine*
George R. Prout, Jr., *Urology*
Leonardo S. Reyes, *Environmental Services*
Cora B. Reynolds, *Nursing*
Winthrop A. Riley, *Security*
James T. Roberts, *Anesthesia*
Jeanne M. Rosa, *Cardiac*
Blanca Rosales, *Materials Management*
Matilda Ryan, *Dietetics*
John F. Ryan, *Anesthesia*
Judith A. Sacco, *Clinical Administration*
John J. Schena, *Maintenance*
Nancy L. Sencabaugh, *Budget & Cost Accounting*
Stanley E. Shaw, *Nursing*
Lucille Sherman, *Oral & Maxillofacial Surgery*
Clotilda M. Simpson, *Dietetics*
Joseph H. Smigielski, *Maintenance*
Margaret A. Smith, *Charlestown Project*
Edward C. Souza, *Maintenance*
Mary A. Spencer, *Nutrition Service*
Rosemarie S. Srebnik, *Dermatology*
Ella M. Stanley, *Environmental Services*
Mary L. Stanyer, *Clinical Adminstration*
Rita T. Stephen, *Materials Management*
Alan A. Stone, *Psychiatry*
Jean Sullivan, *Pulmonary Disease*
Karen M. Sullivan, *Pedi Pulmonary Lab*
Pennathur Sundaram, *Anesthesia*
Billie J. Swisher, *Proton Therapy*
Edward L. Tabb, *Dietetics*
Maureen M. Tedesco, *Pedi Ambulatory Care*
George E. Thibault, *Medicine*
Linda Thomas, *Human Resources*
Clementin Thurel, *Environmental Services*
Kathleen C. Tiberii, *Nursing*
Christoph Tiglianidis, *Maintenance*
Zonia, Valerio, *Bacteriology Lab*
Joseph A. Viola, *Bio-Medical Tech Support*
William A. Walker, *Pediatrics*
Deborah W. Wallace, *Neurosurgery*
Christopher D. Warren, *Medicine*
Mary V. Wein, *Vincent Memorial Research Lab*
Helen E. Williams, *Anesthesia*
Robert Williams *Nursing*
Dennis J. Willis, *Radiology*
Susie M. Yarbough, *Dietetics*
Anthony F. Zingarelli, *Radiology*

FOR TEN YEARS

Stephanie E. Adams, *Dietetics*
Gerald Adler, *Psychiatry*
Susan Aguiar, *Nursing*
Gail A. Alexander, *Nursing*
Pauline E. Alexander, *Dietetics*
Maria C. Alfonso, *Medical Walk-in Unit*
Philip B. Allen, *Dietetics*
Phillip A. Allen, *Materials Management*
Mary S. Almeter, *Gyn Associates*
Martha L. Andrews, *General Medicine*
Elizabeth Angel, *Ambulatory Care Administration*
Patricia Anglin Regal, *Nursing*
Julia A. Angueira, *Nursing*
Neil Aronin, *Neuroendocrinology*
Ann M. Austras, *Nursing*
John I. Baker, *Environmental Services*
William R. Baker, Jr., *Administration*
Betty E. Barrett, *Nursing*
Barrant B. Bartley, *Environmental Services*
Michelle E. Bell, *Purchasing*
Emilyn S. Bellavia, *Nursing*
Grace M. Benoit, *Credit & Collection*
Michael L. Biales, *Communications*
Joseph Biederman, *Psychiatry*
Edward D. Bird, *Neuroendocrinology*
Kathleen M. Bomba, *Nursing*
Norman J. Borkow, *Dietetics*
Marjorie Bowman, *Credit & Collections*
Catherine Boyd, *Nursing*
Kirven B. Boyd, *Dietetics*
Charles R. Bragdon, *Orthopaedic Research*
Christine Briggs, *Pediatric Micorchemistry Lab*
Dave H. Brooks, *Environmental Services*
Agnes M. Brown, *Dietetics*
Maureen S. Brown, *Nursing*
Peter M. Brown, *Computer Center*
Valerie J. Buckley, *Nursing*
Jane M. Bujold, *Nursing*
John J. Bump, *Parking & Commuter Services*
Ferdinando S. Buonanno, *Neurology*
Susan D. Burgess, *Nursing*
Margaret M. Byron, *Communications*
Veronica Cacciola, *Nursing*
Mary E. Cadigan, *Nursing*
Ardel M. Callender, *Anesthesia*
Joshua F. Camblos, *Radiation Medicine*
Carol J. Camooso, *Nursing*
Anthony Campbell, *Anesthesia*
Sharon R. Campbell, *Endocrine Lab*
Susan P. Caputo, *Radiology*
Carol L. Card, *Cardiac Procedure Service*
Cynthia Cardon, *Nursing*
Mavis C. Carroll, *Radiology*
Carolyn Catinazzo, *Gyn Associates*
Eduardo Cespedes, *Environmental Services*
Cynthia M. Chadbourne, *Radiology*
Francette Chappell, *Environmental Services*
Betty Chin, *Maintenance*
Lucy M. Chou, *Infectious Disease*
Nicholas L. Ciampa, *Environmental Services*
Nicholas J. Clemente, *Psychiatry*
Martin S. Cohen, *Psychiatry*
Martha A. Collette, *Psychiatry*
Claire Conlan, *Charlestown*
George Connelly, *Clinical Administration*
Mary Connolly, *Social Service*
Rose C. Cornely, *Environmental Services*
Diane R. Costello, *Blood Transfusions Service*
Charles J. Cote, *Anesthesia*
Wendell A. Coward, *Anesthisia*
Kathleen A. Crane, *Nursing*
Richard R. Crater, *Fiscal/Administration*
Susan M. Croteau, *Nursing*
Arthur W. Currier, *Materials Management*
Donna M. Cutillo, *Anesthesia*
Sylvester E. Daley, *Dietetics*
Donna J. Darouey, *Professional Billing*
Louise M. Dattoli, *Resources & Development*
Wilfred G. Davis, *Administration*
Steven L. Dawson, *Radiology*
Brenda A. Deane, *Radiology*
Dawn D. Dennen, *Nursing*
John Der Ananian, *Bio-Medical Technical Support*
Joanne M. Desantis, *Medical Oncology*
M. Sheila Desmond, *Pediattrics*
Frances T. Devico, *Radiology*
Martha P. Devin, *MGH Surgical Associates*
Salvatore Dicecca, *Orthopaedic Workshop*
Gail E. Dickson, *Psychiatry*
Anthony D. Digiovine, *Nursing*
Margaret Dineen-Orsini, *Nursing*
Tammy J. Donofrio, *Clinical Administration*
Mary A. Dorazio, *Radiology*
Joyce A. Dowd, *Admitting*
Debra A. Duhamel, *Cardiac Lab*
Richard G.Duke, *Respiratory Care*
Edna A. Duncan, *Surgery*
Catherine C. Eberly, *Anesthesia*
Florence G. Eden, *Dietetics*
Susan M. Edgerton, *Pathology*
Maureen F. Ellis, *Administration-Research*
Paul M. Epstein, *Psychiatry*
Thersa M. Ewing, *Medical Walk-in Unit*
Joanne M. Fahey, *Nursing*
Patrick J. Famolare, *Maintenance*
Kathleen A. Farrell Alexa, *Nursing*
Martha S. Feinberg, *Charlestown Project*
Mike A. Felder, *Dietetics*
Donna Felsenstein, *Medicine*
Gloriosa A. Fenol, *Chemistry*
Carol A. Ferrandi, *Dermatology*
Robert J. Ferrante, *Pathology*
Jessica L. Fewkes, *Dermatology*
Jay A. Fishman, *Medicine*
Carol R. Flaherty, *Social Service*
Kathleen Fleming, *Cardiac Ultrasound*
Elayne R. Fodeman, *Nursing*
Mary T. Foley, *Program Facilities*
Tabitha H. Folkes, *Dietetics*
Meta E. Fontellio, *Materials Management*
Ernestine F. Forbes, *Cardiac Lab*
Richard P. Freeman, *Radiology*
Mason W. Freeman, *Medicine*

Surprise Party for Padi—Mums the word!

Padihershef, the MGH's resident mummy, returns home soon from an 18-month-long tour across the country with the Rameses Exhibit. The Archives division of the News and Public Affairs Department will welcome him home with a reception in the Ether Dome Tuesday afternoon, November 14. Please call ext. 2206 for the scheduled time or for more information.

Anthony Fucaloro, *Maintenance*
Judith Gallagher-Miller, *MGH Surgical Associates*
Mary Geary, *Urology*
Leo A. Geleas, *Environmental Services*
Arla B. Gentle, *Clinical Adminstration*
Kenneth F. Giannino, *Chemistry*
Kathleen M. Gill, *Rehabilitation*
Ann T. Gillis, *Credit & Collection*
Jeanne M. Giovino, *Nursing*
Margaret D. Gittens, *Dietetics*
James W. Glavin, *Bacteriology*
Ronald G. Gore, *Anesthesia*
Neil S. Gore, *Psychology*
John J. Gould, *Nursing*
Miriam R. Gourley, *Radiology*
Rosemary A. Grannum, *Clinical Administration*
Richard D. Granstein, Dermatology
Rosalyn A. Gray, *Administration-Research*
Eileen M. Greeley, *Cardiac Cath Lab*
Patricia M. Griffin, Nursing
Diana W. Grobman, *Staff Education*
Carey C. Gross, *Psychiatry*
Sonja K. Gross, *Neurology*
Robert L. Guerra, *Cardiac Bio. Research Lab*
Kirt Gulston, *Medical Records*
Joseph W. Hall, *Parking & Commuter Services*
Andrew D. Hamilton, *Bio-Medical Technical Support*
Isadora Hamilton, *Clinical Administration*
Jane F. Hardiman, *Anesthesia*
Linda M. Hardy, *Emergency*
Karen, B. Harley, *Rehabilitation*
Paul R. Harmatz, *Pediatrics*
William P. Harvey, *Security*
Kathleen M. Healey, *Chelsea Health Center*
Bobby L. Henry, *Dietetics*
Charles F. Herron, *Reading Disabilities*
John F. Hickey, *Ambulatory Care Administration*
James A. Hinds, *Computer Center*
Barbara A. Holleman, *Chelsea Health Center*
Linda C. Honeycutt, *Orthopaedics*
Rosemary Howard, *Anesthesia*
Nancy W. Huggins, *Renal Research Unit*
Robert A. Hughes, *Medicine*
Edward J. Hunnicutt, *Neurology*
Frances J. Indiciani *Office of Contract Management*
Dorothy J. Iosua-Gonzales, *Nursing*
Darlene M. Jackson, *Hematology-Oncology Unit*
Willie C. Jackson, *Environmental Services*
Rita Jaghoo, *Environmental Services*
Ethelbert Jarrett, *Dietetics*
Judith M. Jeddrey, *Nursing*
Michael A. Jenike, Psychiatry
Christina Johnson, *Inpatient Phlebotomy*
Cynthia Johnson, *Nursing*
Jeffrey R. Johnson, *Nursing*
Douglas C. Johnson, *Medicine*
Virginia A. Johnson, *Psychology*
Frank Joseph, *Inpatient Phlebotomy*
Robin M. Joslyn, *Nursing*
Julia A. Kahn, *Radiation Medicine*
Anthony J. Kapadoukakis, *Radiology*
Ilse E. Kaprielian, *Anesthesia Acute Care Lab*
Susan V. Kattapuram, *Radiology*
Jeffrey E. Katz, *Gynecology*
Bruce L. Kaynor, *Pathology*
Lee A. Kearse, Jr., *Neurology*
Constance H. Keefer, *Pediatrics*
Elizabeth A. Kelly, *Cardiac Cath Lab*
Barbara A. Kern, *Radiology*
Inez M. Kerr, *Clinical Administration*
Nancy O. King, *MGH Surgical Associates*
Joan P. Knox, *Nursing*
Diane Kovacev, *Dermatology*
John R. Kroon, *Environmental Services*
Joseph W. Kulas, *Clinical Administration*
Sharon R. Kurtz, *General Medicine*
Karin I. Kutrieb, *MGH Surgical Associates*
David J. Kwiatokowski, *Medicine*
Karen A. Labiberte-Murphy, *Nursing*
Glenn M. Lamuraglia, *Surgery*
Lowell D. Landry, *Maintenance*
Ann M. Lapierre, *Nursing*
Lorinda Latva, *Nursing*
Ann Lau, *Bacteriology*
Denise T. Lauria, *Nursing*
Colin A. Lawson, *Environmental Services*
Linda M. Leahy, *Psychiatry*
Eileen A. LeBlanc *Nursing*
Mary T. Lee, *MGH Surgical Associates*
Marjorie B. Lees, *Neurology*
Paul F. Leonard, *Medical Records*
Joseph Che Kit Leong, *Radiation Medicine*
Janice C. Levy, *Psychiatry*
Zelma M. Licorish, *Dietetics*
Robert C. Lincoln, *Nursing*
Stuart E. Lind, *Medicine*
Cheryl A. Lippi, *Nursing*
William H. Long, *Chemistry*
Kathleen M. Lundgren, *Ultra Sound Lab*
Penney L. Lydon, *Nursing*
Ellen MacDonald, *Nursing*
Richard A. MacDougall, *Charlestown Project*
Joyce E. MacLean, *Radiology*
Elizabeth MacLellan, *Nursing*
Richard L. Maddox, *Parking & Commuter Services*
Bodil D. Madsen, *Chemistry*
Kathleen H. Mahoney, *Nursing*
Edward H. Malagodi, *Maintenance*
Patricia A. Maloney, *Blood Transfusion Service*
Michael P. Manning, *Cardiovascular Lab*
Judy B. Manola, *Dietetics*
Martha M. Marean, *Gynecology*
Barbara J. Marino, *MGH Surgical Associates*
Edward B. Marsh, Jr., *Pediatrics*
Linford L. Martin, *Dietetics*
Maria E. Marzullo, *General Medicine*
Eileen M. McAdams, *Chelsea Health Center*
Mary E. McAuley, *Nursing*
Daniel J. McAuliffe, *Dermatology*
James A. McBrine, *Emergency*
Judith A. McCarthy, *Nursing*
Ellen L. McCune, *Nursing*
Madeleine A. McGarry, *Nursing*
Donna McKay, *Nursing*
Charles K. McKitrick, *Diabetes Unit*
Reina I. McLaughlin, *Clinical Administration*
Camilla D. Meade, *Professional Billing Office*
Elaine M. Meade, *Orthopaedics*
Valerie A. Megna, *Environmental Services*
Linda P. Merk, *Gynecology*
Dolores M. Merlino, *Nursing*
Michael J. Meskell, *Thyroid*
Betsy C. Micucci, *Fernald School*
Donna Mills, *Clinical Administration*
Ralph E. Minear, Jr., *Pediatrics*
Karen E. Minyard, *Endocrine*
Joan M. Misiano, *Pedi Pulmonary Lab*
Erasmo M. Mitrano *Pharmacy*
Mary C. Moir, *Neurophysiology Lab*
June M. Moloney, *Hematology*
Joseph Mooltrey, *Endocrine*
Guianders R. Moore, *Environmental Services*
Albert E.Morin, *Orthopaedic Workshop*
Roberta L. Morrison, *Radiology*
Richard A. Moscicki, Medicine
James F. Mulhern, *Clinical Administration*
Kizito V. Muliro, *Clinical Adminsitration*
Tove Muller, *Social Service*
Barney Murphree, *Radiology*
Mary Jane Murphy, *MGH Surgical Associates*
Sean M.Murray, *Medical Records*
Bonney R. Myles, *Cardiac Lab*
Janet M. Nally, *Nursing*
James A. Nathanson, *Neurology*
Jennifer A. Neves, *Nursing*
Suzanne Newton, *Radiology*
Lisa A. Nickole, *Nursing*
Rebecca Niloff, *Pediatrics*
Dennis K. Norman, *Pediatrics*
Nancy A. Nyberg, *Nursing*
Elaine V. O'Neil, *Cortical Function Lab*
Eileen G. Odle, *Environmental Services*
Sheroon N. Ogarro, *Radiology*
Cheryl Oliver, *Peripheral Vascular Lab*
Jean M. Onelli, *D.R.G. Analysis*
Marie T. Ortiz, *Credit & Collection*
Sabina Osborne, *Dietetics*
Martin G. Ostro, *Medicine*
Edwin L. Palmer, *Radiology*
Barbara A. Parisi, *MGH Surgical Associates*
Charles C. Payne, *Dietetics*
Marion E. Pearce, *Credit & Collection*
Deanna R. Pearlmutter, *Nursing*
Emma L. Peterson, *Environmental Services*
Richard H. Peterson, *Environmental Services*
John W. Peterson, III, *Neurosurgery*
Ellie J. Petillo, *Orthopaedics*
Elizabeth M. Phillips, *Dietetics*
Susan A. Phillips, *Nursing*
Anne Picariello, *Dermatology*
Dennis J. Picariello, *Security*
Susan C. Pierce-Chana, *Clinical Administration*
Roland Peirre, *Materials Management*
Patricia E. Pires, *Nursing*
Pablo Polischuk, *Psychology*
James M. Quinn, *Anesthesia*
Margaret E. Ramage, *Nursing*
Jennifer M. Rathbun, *Psychiatry*
Virginia Raulinaitis, *Radiology*
Eileen S. Reynolds, *Nursing*
Judy E. Riley, *Urology*
Peter N. Riskind, *Neurology*
Catherine J. Robbins, *Fiscal Affairs*
Elizabeth Robbins, *Pediatrics*
Claray A. Roberts, *Dietetics*
Marlene L. Roman, *Nursing*
Maryalyce E. Romano, *Nursing*
Carl F. Rosenbloom, *Pediatrics*
Mary J. Ross, *Social Service*
Brenda L. Rubin, *General Medicine*
Franklin D. Rudolph, *Professional Billing Office*
Kathiann P. Runey, *Nursing*
Michael D. Russell, *Radiation Medicine*
Barbara A. Salamone, *Blood Transfusion Service*
Shirley Sargent, *Nursing*
Joanna M. Sawicka, *Radiation Medicine*
Barbara E. Scafidi, *Nursing*
Cecelia L. Schieve, *Nursing*
Elizabeth A. Schifone, *Radiology*
Eveline E. Schneeberger, *Pathology*
Eva Schoenfeld, *Psychiatry*
Robert T. Schooley, *Medicine*
Gerald A. Schwarting, *Neurology*
Sarah G. Sciretta, *Nursing*
Anad K. Seth, *Administration*
Katherine B. Sims, *Neurology*
Nathaniel M. Sims, *Anesthesia*
Daniel E. Singer, *Medicine*
Margaret A. Skarinka, *Nursing*
Karen B. Slutsky, *Computer Center*
Sarah M. Small, *Nursing*
Katherine K. Smith, *Clinical Administration*
Marie C. Smith, *Emergency*
Edward J. Smolak, *Clinical Administration*
Sharon Soloman, *Orthopaedics*
Paul Soloman, *Pediatrics*
Betty Soloman, *Admitting*
Christoph J. Sorrento, *Maintenance*
Robert V. Steiber, *Maintenance*
Thomas C. Sterne, *Medicine*
Muriel E.M. Sugarman, *Psychiatry*
Louise R. Sullivan, *Orthopaedics*
Patricia J. Surabian, *Nursing*
Ernest L. Tabb, *Dietetics*
Carol M. Tarpey, *Nursing*
Erica E. Taylor-Moore, *Nursing*
Concetta R. Tecce, *Medical Oncology*
Walter Tellis, *Environmental Services*
Cynthia S. Thibodeau, *Chest Physical Therapy*
Delores T. Thorne, Environmental Services
Veronica B. Tisza, M.D., *Psychiatry*
Susanne M. Tommey, *Nursing*
Mary P. Toomey, *Nursing*
Jeanne G. Towles, *General Medicine*
Mary D. Trust, *Neurosphysiology Lab*
Joseph F. Umbro, *Fiscal Affairs*
Nancy C. Vallande, *Infection Control*
Kettly Vilbrun, *Chemistry*
Frank Vislosky, *Anesthesia*
Mark Vonnegut, *Pediatrics*
Norma J. Warner, *Orthopaedics*
Stan Wasserman, *Cardiovascular Lab*
Zadie M. Weaver-Burt, *Environmental Services*
Muriel Wedkstein, *Psychology*
Harriet A. Weinstein, *Cardiac Lab*
Daniel P. Weisenmiller, *Dietetics*
Arnold I. Weiss, *Pediatric Dentistry*
Ellen R. Westling, *Treadwell Library*
Rosemary J. Westra, *Nursing*
Stephanie A. White, *Nursing*
Augustus A. White, *Orthopaedics*
Joseph W. Wilkes, *Oral Surgery*
Caroline D. Williamson, *Revere Health Center*
Ellen M. Wilson, *Pathology*
Franseco R. Wilson, *Environmental Services*
Susan M. Witkie, *Psychiatry*
Brenda J. Woods, *Materials Management*
Sophie R. Zaitz, *Dietetics*
Paul M. Zusky, *Psychiatry*

MASSACHUSETTS GENERAL HOSPITAL

Ether Day Observance

1989

Because of space limitations the names of five – year pin recipients will appear in the next Hotline. Also watch for "On Ether Day MGH celebrates employees."

Referral service

from page 1

been diagnosed before? Has the potential patient had a general exam? By the time we call the appointment secretary, we think that we have a patient that is appropriate for that area. We want to make the best match possible based on the information the patient and the MGH physician give us."

The referral coordinator offers available options and lets the patient choose. She then assists the patient in making the appointment by calling the physician's office and having a three-way conversation with the appointment secretary and the patient. The referral service later sends out a written confirmation of the appointment and makes a follow-up call to make sure that the patient remembers the appointment and has directions to the doctor's office.

The service is helping to make the MGH more *user friendly.* "The service," said Ms. Buckley, "relays the message that we really do care, and we are not too large for you. We are here to listen. And we are here to direct you to the right place."

For the patient, the referral service can help unravel the confusion of finding a doctor. When Phillip Chatelain, Programmer Analyst for Knowledge Data Systems, relocated to Boston to assist the hospital with computerization, he wanted to find a physician for his family. Surrounded by doctors, yet not knowing whom to call, Mr. Chatelain heard about the referral service by word of mouth. He worked with referral coordinator Nancy Albanese. "Nancy did an extremely good job of finding a multitude of specialists," he said. "She found a gynecologist for my wife, a pediatric nurse practitioner for our 7-year-old little girl, an internist and an orthopedic surgeon for me. The service has been able to meet both our physical and emotional needs."

As well, MGH physicians often have difficulty referring their patients to other specialists within the hospital because of long waiting lists. "It is extremely difficult to refer a patient from specialty to specialty because our doctors are so busy," said Dr. Ackroyd. "There are long waiting periods."

"As a surgeon," continued Dr. Ackroyd, "I spend much of my time trying to get appointments for my patients with an internist or an orthopedist. I can't do it. In certain areas we are almost drowning in our own success."

For Dr. Ackroyd and his colleagues, the MGH Physician Referral Service can be of help. The service can help ensure an appropriate match between physician specialty and patient, shorten waiting times by directing referrals only to physicians who can see new patients, assist physicians with getting referrals for their own patients, and relieve MGH doctors and their staffs of scheduling headaches so that they can concentrate on providing care.

"We intended the Physician Referral Service to be an organization which would be useful to people coming into the hospital as well as to MGH physicians," said Dr. McFarland, who is also Assistant Clinical Professor in Medicine at Harvard Medical School. "So far it is

continued on page 4

MGH HOTLINE

Town meeting

from page 1

drastically paired down in the Senate). "The universal health insurance law is in big trouble," he continued. The state's universal health insurance law is being postponed until 1993 and in reality may never see the light of day. "And the Senate Finance Committee has cut the budget for Medicare reimbursement to inner-city teaching hospitals while it has added a billion dollars to the budget for rural hospitals," said the General Director.

Failure to meet admissions goals limited the amount of reimbursement we were entitled to from the state. We budgeted a 5.4% increase in admissions for 1989. And though we had 413 more admissions than we did last year, we still came in 4% under our target. However, the hospital has embarked upon several marketing initiatives to improve the utilization of its services. One includes the Physician Referral Service (see page 1 story) which will help make MGH patient care services more available to the public.

The state has only partially paid back monies it owes to hospitals for Medicare and Medicaid reimbursements. While this has provided some immediate relief, in the long run it has hurt us financially. To pay for goods and services, the MGH invaded invested funds to the tune of $17 million. By essentially being lenders to the state, we have lost the interest we would have earned on those monies.

A question from the audience addressed allegations that hospitals don't make enough of an effort to collect bills. The state has devised very stringent regulations that require hospitals to pursue payments in a way in which Dr. Buchanan described as "hostile." And the General Director thinks the allegations are unfair: "I tell you that the implementation of these regulations will be regarded as hostile behavior on our part by the patients we dun in the fashion they are describing. Moreover, our experience has shown that the return on that kind of dunning doesn't have the desired effect in the first place. It's just trying to get blood out of a stone."

Other issues discussed at the Town Meeting included the Capital Campaign and construction of new buildings on the MGH campus. The capital campaign has reached $161.8 million with a goal of $169 million by December 31.

The money that is used for construction comes from the capital budget and can not be used for wages and salaries. "Believe me," said Dr. Buchanan, "if I could take the money out of the buildings and convert it to salary and wage money and not end up behind bars for doing it, I would do it."

Additionally, it is to the hospital's advantage to borrow money for capital expansion because the state reimburses us for the interest on that money. Also, the buildings will house activities that will bring income into the MGH. They will eventually pay for themselves. And as Dr. Buchanan noted, "If we don't buy new equipment; if we don't improve the patient care facilities; we are going to lose in a competition in this city, in this region, and in this nation which is getting tougher and tougher day by day."

Dr. Buchanan also discussed the management reorganization which will redistribute some administrative responsibilities. Lawrence M. Martin, Associate General Director, has served the MGH for 40 years and began partial retirement in September. He will remain at the MGH part-time to oversee the completion of the tower project. As well, Joseph P. McCue, Treasurer and Vice President for Finance, has been with the hospital for 38 years and is retiring. Messrs. Martin and McCue will not be replaced, but their responsibilities will be distributed throughout the existing management team.

Because of changes in IRS regulations, the hospital has changed the structure of the pension plan. The General Director stressed, however, that the change did not result from the budget cuts.

Dr. Buchanan said that plans for a day care center will be underway as soon as a suitable site can be found. (The Board of Trustees has since approved a site at the Captain's Quarters at the Charlestown Navy Yard.) Additionally, the hospital plans an employee assistance program for alcohol and substance abuse. The program will be funded by a grant from the federal Occupational Safety and Health Administration.

Given all of these issues, Dr. Buchanan acknowledged that MGH employees remain the hospital's best and most constant resource. "The trustees and I know and feel deeply that you represent our best strength. You are it," said the General Director.

And toward nurturing that resource, the hospital is looking at ways to improve career ladders for employees. "Good people have always been scarce," Dr. Buchanan said. "But given the waning of the baby boom and the educational blight of our cities, it is going to be even more important that we attract the best and that we keep them."

Dr. Buchanan concluded by mentioning an appreciative note he received from a patient undergoing radiation therapy. The patient expressed his gratitude at the extraordinary care he has received at the MGH. "Everybody that counts knows that you are the resource with which we provide that kind of care," the General Director said. "It is dismaying to me that we are in a situation in which we cannot give tangible evidence to the deep appreciation that we feel toward all of you."

The Boston Business Journal rakes hospitals

Last week the Boston Business Journal published an article entitled "Hub's Teaching Hospitals Raked in $106 million in 1988." The article stated "Massachusetts General Hospital and its six affiliated corporations in Greater Boston accounted for $55 million—more than half the profits—on total revenues of $716.6 million." What the article didn't say is important.

The key phrase is "affiliated corporations." The affiliated corporations the writer refers to are The Spaulding Rehabilitation Hospital Corporation, The McLean Hospital Corporation, The MGH Institute of Health Professions, Inc., The Professional Services Corporation, The General Hospital Corporation (the organization we all call the Massachusetts General Hospital), and The MGH Health Services Corporation.

To lump the revenue of all of these together and imply that they are the "profits of the MGH" is misleading and manipulative. How could we, for instance, take McLean's surplus revenue and apply that to our operating budget.

The article goes even further in lumping monies from the hospital's different budgets into one sum. As has come up many times in Town Meetings and elsewhere, monies that have been designated for capital expenditures (buildings and new equipment, for instance), cannot be used for operating expenses (i.e., salaries and wages). Donors expect us to act in good faith and use their donations as they intended. And the law requires that we keep the budgets separate. Printed here is Dr. J. Robert Buchanan's response to the Journal article.

25 October 1989

Letters to the Editor
Boston Business Journal
451 D Street
Boston, MA 02210

To the Editor:

The October 23 Boston Business Journal article entitled "Hub's Teaching Hospitals Raked in $106 million in 1988" is an unconscionable misrepresentation of the fiscal realities faced by Boston teaching hospitals. The article randomly combines monies available for the hospitals' routine operations budgets in caring for the sick with those which must be held apart and used for restricted special purposes [for instance the capital budget]. Erroneous aggregation of unrelated financial data may make exciting headlines but leave readers uninformed and badly misled.

The fact is people who donate money to hospitals for specific reasons, such as construction of a new building or cancer research, have a **legal** right to expect those funds to be used for the purpose given. Similarly, the hospital's trustees have a **legal** obligation to separately account for such donations to assure that the donor's wishes are followed.

The story states that, "The MGH and its six affiliated corporations in Greater Boston generated $55.5 million in profits in 1988." The reality is that the hospital commonly called "the MGH" (legally the General Hospital Corporation) lost $1.88 million in fiscal 1988 and anticipates a $3 million loss for fiscal 1989. That hospital is part of a family of six sisters and one parent. Including that $1.88 million loss by the "MGH" (General Hospital Corporation), one finds the total surplus of the entire family of institutions was $13.9 million a year ago. This surplus is 1.8 percent on a gross revenue of more than $756 million. No sane investor would gamble his or her fortune on a corporation with those numbers. Even if the surplus could be transferred to the General, it would come nowhere near what is needed to upgrade technology and adequately reward its employees. Yet we have to compete in the marketplace for the most talented employees and the most advanced technology.

Even forgetting this, the fact is we cannot transfer money from one member of the family to another without precipitating a revolution. How, for example, would the employees of McLean Hospital, our sister institution in Belmont, react to such a robbing of Peter to pay Paul?

The same tactics used by the article to attack the MGH were undoubtedly employed by the writer to denigrate the other teaching hospitals. First he used this duplicity to tar the hospitals. To give the appearance of being balanced, he later quoted hospital representatives as pointing out the misrepresentation. Then he quoted unnamed "hospital critics" who purportedly agree with the writer's folly. An insidious way to persuade the reader and still give an air of impartiality.

Collectively Boston teaching hospitals bring to Massachusetts more NIH research money than do hospitals in any other metropolitan area in the country. Patients come from all over the world to seek help from these hospitals. Massachusetts governmental leaders are delighted to rhapsodize on that theme any time they are seeking to attract business or top executives to the Boston area. The Massachusetts economy needs these hundreds of millions of dollars spent here. Let's not resort to bald sensationalism to sell newspapers by unfairly attacking the teaching hospitals, one of the major contributors to the commonweal of this Commonwealth.

Sincerely,
J. Robert Buchanan, M.D.
General Director
Massachusetts General Hospital

Referral service

from page 3

doing just what we intended. And it is helping make MGH patient care resources available in a more efficient way."

For the patient and the physician, the MGH Physician Referral Service spells relief. Call the service at 726-5800 if you need a referral to an MGH care provider or more information.

The MGH HOTLINE is published twice monthly by the MGH News Office.

William E. Walch, *Vice President for Resource Development and Public Affairs*

Martin S. Bander, *Director of News and Public Affairs*

Kennetha J. Bigham, *Editor*

MGH HOTLINE

23 November 1989

A publication of the
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of Massachusetts General Hospital
Bartlett 9, Extension 2206

Dr. J. Robert Buchanan, MGH General Director, presented Drs. Thomas Cech and Joan Steitz with Warren Triennial Prize Medals last month. The Warren Prize has proved to be a good predictor of Nobel Prize winners, and the day after the Warren awards presentation, Dr. Cech received the Nobel Prize in Chemistry. Dr. Michael Bishop, a Warren Triennial Prize winner in 1983 who did his residency and internship at the MGH, received this year's Nobel Prize in Medicine. Dr. Steitz is the first woman to receive the Warren Prize.

MGH's Warren Prize often heralds Nobel

A 118-year-old tradition of the MGH continued last month when two noted scientists delivered the prestigious Warren Triennial Prize Lectures at the hospital.

The Warren Prize, awarded every three years for outstanding research, has proved to be a good predictor of Nobel Prize winners. Since 1953, 12 of the 26 Warren Prize winners have gone on to receive the Nobel Prize (usually in medicine and physiology).

The latest examples are Thomas R. Cech, Ph.D., of the University of Colorado at Boulder, who won the Nobel Prize in chemistry just one day after receiving the MGH's Warren Prize on October 11, and Dr. J. Michael Bishop of the University of California at San Francisco, who was announced in October as the Nobel winner in medicine for his work in uncovering the genetic basis of cancer. Dr. Bishop, who did his internship and residency training at the MGH in the 1960s, received the hospital's Warren Triennial Prize in 1983.

Also honored with this year's Warren Prize was Joan A. Steitz, Ph.D., Professor of Molecular Biophysics and Biochemistry at the Yale School of Medicine. Dr. Steitz is the first woman to win the MGH award.

For many years, the award presentation has included a lecture by the winners. Dr. Steitz spoke on "Small nuclear ribonucleoproteins: Diversity in form and function," and Dr. Cech, American Cancer Society Professor of Chemistry and Biochemistry at the University of Colorado, discussed the "Catalytic

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The MGH goes to five-digit dialing

Soon, when dialing MGH extensions, you will have to jump-start the number with a 6.

On December 4, the hospital will adopt a five-digit dialing system for all internal calls. The four-digit extensions for departments will remain the same but must be preceded by a 6 to complete the call. For example, to call Communications you will dial 6-2086.

Any call made from the hospital to a location outside the MGH will be dialed as usual, and the MGH's main phone number won't change. When you call the hospital from an outside line, you will still dial 726-2000. However, the prefix for dialing the new inpatient care building will be 724 followed by four digits, and for internal dialing, tower extensions should be preceded by a 4.

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What's the MGH got cooking? -- a new kitchen and a new food service system for patients

FOOD! It's a word that gets people's attention. And now that I have yours....food service at the MGH is about to make a change. With the construction of a new kitchen in the new inpatient care building, the MGH will go to a centralized patient food service system that will feature a restaurant-style menu, greater flexibility to accommodate different nutritional needs, and food service around the clock.

As a result, food preparation and delivery will change. Some employees in the Department of Dietetics will have entirely different jobs. The MGH quality that has always tickled your palates will get even better. And there will be more selections to do the tickling.

"We did this to accommodate the change in patients," said Helen Doherty, R.D., Director of the Department of Dietetics. "As the length of stay has gotten shorter, there is a lot of compression of what happens to a patient during the day. Our primary focus was to find a system of food delivery that would be very flexible."

By flexibility Ms. Doherty means for one that patients can get their meals at irregular hours if needed. A patient out for a test won't have to miss a hot meal. "Right now," said Ms. Doherty, "if a patient goes off the floor for a test and is not back within 45 minutes of breakfast, for example, we really can't serve a hot breakfast. The patient's only option might be toast and cold cereal."

Helen Doherty, Director of the Department of Dietetics, takes a moment from surveying blueprints of the new kitchen in the inpatient care tower.

The new food service system will utilize a concept of partial cooking, quick chill, food finishing and assembly, and microwave preparation on the patient floors. Each floor will be equipped with a galley where partially cooked food will be re-thermalized by microwave. The galley also will include a wide mouth toaster, coffee maker, and a freezer. The inclusion of the additional appliances was prompted because coffee and toast must be

continued on page 4

There was one big snaggle-toothed jack-o-lantern on Vincent 4 on Halloween. MGH anesthesiologist Frederic deBros grows pumpkins in his garden near the Quabbin Reservoir. This one weighed nearly 300 pounds. He brought the pumpkin to the Children's Service where MGH patients dug in and carved it up.
Two of the pumpkin craftsmen pose here with the good doctor and recreational therapist Sally Cave. From left are Eric Harrison, 12, of East Boston, Dr. deBros, Ms. Cave, and Atiim Walker, 13, of Dorchester. Dr. deBros says he will try for a 600 pounder next year. See page 4 for more Halloween photos.

On Ether Day hospital celebrates employees

Last month the MGH celebrated an Ether Day bonanza. More than 900 employees—more than ever honored before—were recognized for 5, 10, 20, 30, 40, 50, and 60 years of service to the MGH.

The average length of service for an MGH employee is 9 1/2 years, and almost two thirds of the hospital's 9,643 employees have worked here for ten years or more.

This year's awardees included three noted physicians who were recognized for 60 years of service to the hospital. They were Dr. Marshall K. Bartlett, a well known surgeon who was a leader in founding the hospital's group practice of surgeons in the early 1950's; Dr. Earle M. Chapman, who played an important role in helping to introduce the field of nuclear medicine; and Dr. Charles L. Short, one of the pioneering experts on rheumatoid arthritis who passed away on the day of the ceremony.

Dr. Chapman, the only 60-year employee who attended the ceremony, was presented a 60-year pin and a commemorative clock engraved with the Bulfinch insignia and his length of service. Presentations were made by Dr. J. Robert Buchanan, General Director, and W. Nicholas Thorndike, President of the MGH Board of Trustees. In addition to their pins, four employees who have given 50 years of service to the hospital were presented plaques designed by Mr. George Terzides in Carpentry.

Much preparation goes into making Ether Day a success. Marion McCauley of Human Resources coordinates the effort. The Computer Center and the Registrar's Office provide the names of employees with five or more years of service. The MGH Flower Shop provides red carnations and the centerpieces for the dinner. Environmental Services, Buildings and Grounds, and the Electric Shop help with logistics. The Print Shop assists with getting the invitations printed, and employees in the Photo Lab take the pictures which are presented to each awardee. The Department of Dietetics caters the reception and the dinner. And Dr. Buchanan personally hand signs the hundreds of letters and certificates.

MGH photographer Paul Batista accepts a five-year pin from Jeff Davis, Assistant General Director, Support Services.

Dr. Earle M. Chapman shares some Ether Day excitement with Kathy Rice (center), Assistant Director of Human Resources, and Judy Newell, RN, Head Nurse on Vincent 3. Dr. Chapman was one of three 60-year-pin recipients.

Because of space limitations we were not able to print the names of five-year-pin recipients in the last issue of the Hotline. Here they ar

SERVICE PIN AWARDS — 1989

In recognition of service

FOR FIVE YEARS

Bernadett M. Ackerly, *Nursing*
Josephine Acquaviva, *Professional Billing Office*
Fabiola Adrianzen, *Hematology*
Polianthy Akritides, *Environmental Services*
Shirley J. Alleyne, *Clinical Administration*
Marie D. Antonioni, *Nursing*
Sandra M. Autori, *Nursing*
Susan L. Ayles, *General Medicine*
Mary L. Bailey, *Dietetics*
Robert L. Bailey, *Security*
Devora R. Baronofsky, *Nursing*
Cynthia N. Barry, *Nursing*
Jaroslav Barvik, *Anesthesia*
Paul R. Batista, *Photography*
Kathleen M. Belknap, *Nursing*
Astrid J. Bent, *Bacteriology*
Marion Berg, *Human Resources*
Ronald A. Bettencourt, *Computer Center*
Steven B. Birnbaum, *Radiation Medicine*
Anne M. Borden, *Nursing*
Kim N. Bowker, *Nursing*
Stephen M. Boylan, *Tumor Registry*
Joseph F. Braidt, *Bacteriology*
Martha J. Branch, *Environmental Services*
Marie L. Briasco, *Nursing*
Kevin M. Brown, *Chemistry*
Pamela A. Brown-Early, *Respiratory Care*
Marion C. Browne, *Nursing*
Marie C. Brownrigg, *Chelsea Health Center*
Georgann B. Bruski, *Radiology*
Susan L. Bua, *Nursing*
Lynn A. Buchanan, *Nursing*
Catherine Butler, *MGH Surgical Associates*
Michael A. Byrnes, *Security*
Kellie Cadigan, *Nursing*
Kathleen Carbone, *Inpatient Phlebotomy*
Juan J. Cardona, *Materials Management*
Deborah A. Carr, *Radiology*
Denise R. Caruthers, *Clinical Administration*
Amelia C. Cataldo, *Urology*
Diems J. Cazeau, *Radiology*
Alice F. Chaput, *Chelsea Health Center*
Susan L. Chauncey, *Social Service*
Susan L. Cheney, *Radiology*
Roger D. Chisari, *Nursing*
Barbara Ciano Walsh, *Nursing*
Pamela L. Ciccone, *Nursing*
Wilhelmin Ciecko, *Dietetics*
Gayle M. Clemons, *Nursing*
Patricia A. Clougherty, *Neurology*
Margo R. Coakley, *Nursing*
Joan F. Coburn, *Professional Billing Office*
Marie T. Cochrane, *Nursing*
Diane M. Collins, *Radiology*
Maryann Columbia, *Nursing*
Dena M. Coluntino, *Pharmacy*
Muriel H. Corcoran, *Cardiac Cath*
Raymond E. Cornett, *Respiratory Care*
Kristine Cote, *Nursing*
Joan D. Coughlin, *Nursing*
Kathleen F. Cox, *Nursing*
Peggy L. Craig, *Environmental Services*
Jacquelin L. Crowell, *Nursing*
Paul T. Culliton, *Clinical Administration*
Joeilen F. Cumpata, *Language Clinic*
Sheila M. Cunniffe, *Clinical Administration*
Barbara A.Cunningham, *Psychiatric Ambulatory Care*
Jill M. Curatolo, *Language Clinic*
Eileen M. Currier, *Nursing*
Denise S. Davis, *Nursing*
Richard P. Decesare, *Anesthesia*
Robin L. Defrancisco, *Purchasing*
Paul L. Defranzo, *Maintenance*
Lisa K. Degrandis, *Nursing*
Brenda A. Delaney, *Nursing*
Lisa A. Dennis, *Nursing*
Lynn A. Devaney, *Nursing*
Patricia M. DiBiase, *Anesthesia*
Nancy C. DiBona, *Nursing*
Paula M. Diebold, *Neurosurgery*
Janine Difranza, *Respiratory Care*
Henrietta A. Dixon, *Environmental Services*
Donna M. Dmuchowski, *Rehabilitation*
Cindy L. Dolly Panka, *MGH Surgical Associates*
Ellen Donahue, *Language Clinic*
Mary L. Donahue, *Nursing*
Maud Dorsainvil, *Environmental Services*
Susan A.Doucette, *Pathology*
Jacquelin J. Downing, *Nursing*
Susan L. Duffy, *Nursing*
Mary F. Duggan, *Nursing*
Mary L. Duket, *Accounting*
Elizabeth A. Dunne, *Nursing*
Annabel D. Edwards, *Nursing*
Laurie A. Elwell, *ACC Admitting*
Deverie A. Eplett, *Nursing*
Linda M. Fecteau, *Rehabilitation*
Dorothy F. Fehrnstrom, *Professional Billing Office*
Dana B. Ferguson, *Communications*
Janice M. Ferretti, *Animal Farm*
Lois J. Filocamo, *General Store*
Beth S. Findley, *Vincent Memorial Research Lab*
Susan L. Fisher, *Social Service*
Paula J. Fitzgerald, *Nursing*
Paul A. Forde, *Maintenance*
David A. Fortson, *Radiology*
Mary K. Fox, *Dietetics*
Robert S. Fox, *Radiology*
Esther Freiberg, *Children's Service*
Susan A. Gage, *Nursing*
Janet M. Gallant, *Nursing*
Kathleen G. Galvin, *Medical Records*
Mary A. Galvin, *Nursing*
Sarah Gamboa, *Human Resources*
Jody O. Gastfriend, *Social Service*
Lois R. Gattoni-Celli, *Cardiac*
Raymond F. Gelinas, *Maintenance*
Julie Q. Gifford, *Nursing*
Marilyn Gifford, *Recreational Therapy*
Patricia A. Glendye, *Professional Billing Office*
Deborah C. Goodman, *Clinical Administration*
Whitfield Goodman, *Environmental Services*
Robert L. Goulet, *Respiratory Care*
Rosalie A. Griesse, *Medicine*
Carole J. Gruszka, *Nursing*
Carla R. Gulino, *Nursing*
Marvin Guthrie, *Office of Technology Administration*
Bruce E. Hamaty, *Pathology*
Donna M. Handley, *Nursing*
Mark D. Handschumacher, *Cardiac Bio. Research Lab*
Nancy Hanessian, *Radiology*
Edith P. Hanks, *Radiology*
Cecile A. Hannon, *Nursing*
Barbara Harris, *Clinical Administration*
Maryhelen Harty, *Radiology*
Theresa L. Hayes, *Information*
Patricia L. Hayward, *Clinical Administration*
Barbara Healy, *Nursing*
Margaret T. Hegarty, *Surgical Research*
Susan C. Henderson, *Nursing*
Louis E. Hersch, *Maintenance*
James P. Hickey, *Radiology*
John M. Hilton, *Clinical Administration*
Ruth M. Hobbs, *Clinical Administration*
Amelia Hoffman, *Cardiac Cath Lab*
Aii-Lyan K. Houng, *Cardiac Bio. Research Lab*
Han-Hwa K. Hung, *Orthopaedic Research*
Alfred A. Huston, *Pharmacy*
Ellen P. Hutchinson, *Nursing*
Ellen C. Hynes, *Nursing*
Ann R. Jampel, *Rehabilitation*
Anne C. Jarvis, *Nursing*
Roxanne Jarvis, *Nursing*
Mark A. Jay, *Materials Management*
Collette A. Jennings, *Nursing*
Lisa H. Jones, *Nursing*
James A. Juliano, *Chelsea Health Center*
Robert M. Kacmarek, *Therapeutic Services*
Sheila C. Kading, *Nursing*
Sarah J. Kane-Heiskari, *Cardiovascular Lab*
Susan M. Kaye, *Nursing*
Michael J. Kelly, *Maintenance*
Aii-Hwa Khaw, *Urology*
Judith G. King, *Nursing*
Michael J. Kingston, *O.R. Administration*
Robert F. Kitfield, *Blood Transfusion Service*
Barry R. Kosloff, *Infectious Disease*
Maryann C. Kotowksi, *Radiology*
Diane C. Kulis, *Gynecology*
Christie F. Kuo, *Cardiac Rehabilitation*
Maria Labov, *General Medicine*
Laura M. Laham, *Nursing*
Michelle Y. Lander, *Nursing*
Pamela D. Lando, *Dietetics*
Teresa Landry-Grimm, *Nursing*
Sandra Laquidara, *Radiology*
Nancy Lassegue, *Environmental Services*
Maureen A. Laughlin, *Nursing*
Donna M. Lawton, *Credit & Collection*
Susan A. Leavitt, *Nursing*
Maryjean Lent,*Credit & Collection*
Daria A. Lesanto, *Nursing*
Ellen P. Levine, *MGH Surgical Associates*
Patricia Liberacki, *Radiology*
Stewart Lipson, *Pharmacy*
Joan A. Lockerby, *Resources & Development*
Joyce Longmire, *D.R.G. Analysis*
Valerie A. Longson, *Registrar's Office*
James P. Lopes, *Nursing*
Mary Lussier-Cushing, *Nursing*
Judith A. Lynch, *Nursing*
Helen G. Lyne, *Neurosurgery*
Jan L. Lyne, *Nursing*
Anne L. Macaulay, *Anesthesia*
Deborah A. MacDonald, *Nursing*
Lisa C. MacInnis, *Bacteriology*
Claire E. MacIsaac, *Nursing*
Marie F. Maguire, *Nursing*
Gerald J. Maiullo, *Maintenance*
Ann Malley, *Nursing*
Rosemary Martin, *Pathology*
Dorothy M. Martyniak, *Nursing*
Cheryl A. Mastrangelo, *Central Accounting*
Ann E. Matacunas, *Oral Surgery*
Paulette M. Matusavage, *Nursing*
Keith D. McCarthy, *Materials Management*
Barbara E. McCormack, *Nursing*
Joseph P. McDonough, *Professional Billing Office*
Lisa M. McDonough, *Radiology*
Robert P. McDonough, *Therapeutic Services*
Thomas A. McGrath, *Security*
Carolyn McKinley, *Charlestown Project*
Christine M. McKinnon, *Nursing*
Livingston A. McLaren, *Materials Management*
Malcolm McLean, *Project Management*
Kathleen M. McNulty, *Nursing*
Elaine C. McSweeney, *Pathology*
Thomas J. McVarish, *Cardiac Bio. Research Lab*
Mary B. Melrose, *Environmental Services*
Donna M. Melvin, *Nursing*
Janice F. Mercik, *Clinical Immunology*
Patricia J. Mian, *Nursing*
Patricia A. Miceli, *Nursing*
Joanna J. Morganelli, *Nursing*
Theresa A. Morris, *Nursing*
Denise J. Mullaney, *Nursing*
Eleanore M. Mullaney, *Environmental Services*
Vanessa R. Mullins, *O.R. Administration*
Yvonne L. Munn, *Nursing Administration*
Constance Murphy, *Nursing*
Phyllis J. Murphy, *Social Service*
Letmaul A. Murray, *Pharmacy*
Remedios F. Nazareno, *Dermatology Research*
Lisa A. Newman, *Language Clinic*
Jill W. Newton, *Blood Transfusion Service*
Leah M. Nickerson, *Nursing*
Lucy F. Nocito, *Credit & Collection*
Colleen A. Nolan, *Nursing*
Marie Norris, *Charlestown Project*
Susan M. Nugent, *Radiology*
Diane C. O'Hara, *Surgery*
Katherine R. O'Hare, *General Medicine*
Helen O'Keefe, *Nursing*
Nancy B. O'Neil, *Pathology*
Saravuth Oeun, *Cardiac Bio. Research Lab*
Wendy C. Olsen, *Admitting*
Michele J. Parsley, *Nursing*
Sokha Pang, *Revere Health Center*
Louise P. Panzini, *Maintenance*
Nanci A. Papagni, *Nursing*
Pravin L. Patel, *Pharmacy*
Kathleen J. Payton, Nursing
Janice Y. Pellegrine, *Nursing*
Antoinett M. Perry, *Pathology*

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What's happening

A record conversion

Earlier this fall, the Medical Records Department completed a move to the Somerville Warehouse and converted its medical records filing system. The department circulates from 2,000 to 3,000 records each day. But because of inadequate space and a confusing filing system, records were sometimes difficult to locate.

Before the conversion, records were stored in seven different active-file areas and three different inactive-file areas. The new active-file room is at the Somerville Warehouse and houses almost 800,000 active records. The inactive-file room is in a storage facility in Roxbury.

The conversion company, RMS Services, Inc., a record management corporation, separated active from inactive records, re-indexed them, and moved the records to the new storage facilities. And in the process of conducting the final audit, more than 750,000 records were bar coded and scanned into the computer system.

As a result, more than 8,000 records thought to be lost were located, and the Medical Records Department has increased its retrieval rate significantly, thus improving its ability to deliver fast and efficient service for patient care, research, quality assurance, and financial audits.

Here Tanya [illegible]man prepares to put a record to bed in the new active-file room at the Somerville Warehouse.

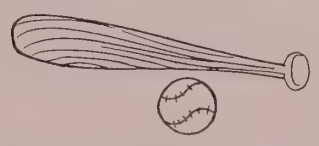
Prostate Study at the MGH

Patients with obstructive symptoms from a type of enlarged prostate called Benign Prostatic Hyperplasia (BPH) are being sought for participation in a study to evaluate a new nonsurgical treatment device. Participants will receive a medical work-up, ten outpatient treatments, and follow-up evaluations. Call Lynette Scribner, RN, of Urology Associates, at 726-8482 for more information.

Women's Softball team ends a memorable season

The MGH Women's Softball Team has completed its most successful season. Steady play throughout the summer took the team to the Boston Parks and Recreation's Parkway League play-offs where continued competitive attitudes brought a second place finish and an automatic berth in the Boston Mayor's Cup city championship.

Playing against teams throughout the Boston area, the MGH women advanced to the quarterfinals before being eliminated. The season was marked by camaraderie and teamwork—from hearing coach Lenny Wasileski shouting encouragement, to Karen Hopcia's excellent pitching that brought a tremendous 3-hit, 6-strikeout performance in the first game of the Mayor's Cup.



Team members will remember Diane Gouveia covered with dirt; Nancy Schaeffer's long stretches and diving catches at first base; Jill Rosenthal's "golden glove" and tremendous defense at second; Annette Mullen's cannon-like arm at third; Jeannette McWilliams' quarterbacking the infield; Laurie Lynch's outstanding defensive plays; and Gloria Gallagher's speed on the bases.

There were Denise Palumbo's sure hands in the outfield; Donna Cutillo's and Lisa Garron's versatility at playing several positions; Emily Handler's amazing speed; Pat Sedenger's enthusiasm behind the plate; Mary Lindsay's and Toby Pearlstein's excellence in the outfield; and Nancy Madsen coming as often as she could to aid the team during the season. Needless to say, it was a year of great fun and accomplishment.

MGH offers course in self defense

Martial Arts instructor Joe Santoro explains to Colleen Dini, of Employee Health, how to foil an assailant. Mr. Santoro, who is a certified black belt in the Shaolin-Kempo style and an MGH Pharmacy Supervisor, is now offering a self defense course to employees. The class focuses on conditioning and learning simple techniques that can help ensure personal safety. The self defense class is sponsored by Employee Health and meets Thursdays 4:15 pm - 5:15 pm in Ruth Sleeper Hall, Room 20. Call Mr. Santoro at ext. 2508 or Linda Lass-Schumacher at ext. 1625 for more information.

Relocation of Patient Care Representatives

The Office of Patient Care Representa[illegible]s has moved from Bulfinch 1 to [illegible]ics 1, Room 116. The office hours will be Monday through Friday, 8:30 am -5:00 pm, and the telephone number remains the same, 726-3370.

Flowers make fragrant Christmas gifts

Christmas is fast approaching, and the MGH Flower Shop recommends that you place your order as early as possible. Worldwide wire service is available. The Flower Shop will accept a major credit card, cash, or check. Call ext. 4500 to place your order.

Speech-Language Pathology hosts lecture series

The Speech-Language Pathology Department will sponsor a lecture series over the next months. The series begins on December 1 with two lectures at the Sheraton Rolling Green Inn, 311 Lowell Street, in Andover, MA.

The first lecture, scheduled for 9:00 am - 11:00 am, is entitled "Learning Disabilities: A Clinical Perspective," and will be delivered by Robert Brooks, Ph.D., Director of Psychology, Training and Community Liaison at the Hall-Mercer Center for Children and Adolescents at McLean Hospital. The fee for Dr. Brooks' lecture is $35.00.

A second lecture, scheduled for 1:00 pm - 5:00 pm, is entitled "Why Can't Devon Read and Write for Understanding: The Problems of Critical Analysis." It will be presented by Sallyanne M. McColgan, Ph.D., Chief Psychometrist of the MGH Learning Disorders Unit. The fee is $55.00. Continuing education credits are available for speech-language pathologists and audiologists. For more information call ext. 2763.

Five-digit dialing

from page 1

A new directory reflecting the change will be available on December 8. And if you forget the prefix, a pre-recorded message will remind you to dial the extra digit.

The change to five-digit dialing will help accommodate the hospital's expansion into the Navy Yard and the new inpatient care building. As the MGH has grown, we have approached the limit of four-digit extensions.

The change will affect anyone with an MGH exchange, including employees at the Navy Yard, River Street, and the Somerville Warehouse.

Dick Crane, Director of Communications, has anticipated some of your questions. Here they are. But you should call his office if you need more information.

How should I place calls?

Any call you place outside the MGH will be dialed exactly as you do it now. Any call to you from outside the MGH will be dialed exactly as it is now, except that external dialing to the new inpatient care building will have a 724 prefix. Any call you place within the MGH will require the 6 prefix and the same four digits you dial today unless you are calling the new inpatient care tower. In that case the extension will be preceded by a 4.

What happens if I forget?

A pre-recorded announceme[illegible]will remind you to dial five digit[illegible]

What is the new Code Call Number?

6-2245

Should I change my printed forms?

Yes. All stationery, purchase orders, etc. should include the 6 as a prefix, or a 4 if applicable.

I have a fax machine. How will I fax information to other departments within the hospital?

All internal fax numbers should include the prefix 6 or 4. For ease in faxing, reprogram the fax machine to reflect the five-digit dialing system.

Do the tie lines change?

For calling outside the MGH, no. For calls into the MGH, the person must dial our tie line as they do today followed by the five-digit extension. For example, employees at such places as the health centers, Spaulding, Shriners, MEEI, and Harvard Medical School use tie lines to call into the MGH. They will now have to follow the tie line number with the five-digit extension.

I use a computer modem. When transmitting internally, must I use the five-digit dialing system?

Yes. For internal modem transmissions you must use the five digits. To transmit outside the hospital, input the number as usual.

I have a security alarm with an automatic dialer. If the alarm goes off, it automatically dials the MGH Department of Police and Security. Do I have to change anything?

Since your alarm dials within the MGH,

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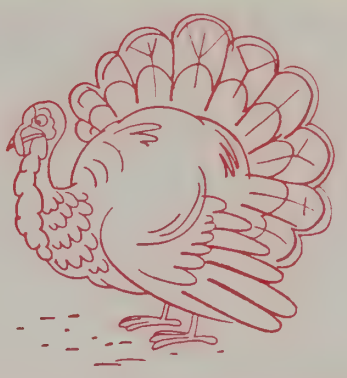
Happy Thanksgiving



Food service

from page 1

served soon after preparation. With the new system, coffee and toast will be prepared on the floor so that patients will receive these foods hot. As well, each galley will be equipped with a freezer stocked with ice cream, a food that often melts in transit. Each galley also will be equipped with juices and broths to accommodate patients who are on liquid diets or simply want a beverage.

The new system will feature a restaurant-style menu with a degree of flexibility never before possible. Patients will be able to select any combination of foods from the menu. For instance, they can select deli sandwiches and designate what kind of meat, cheese, salad mixture, and bread they desire. The menu will include omelets, pancakes, pastas, stir fry dishes, and old favorites like macaroni and cheese. Newer items such as tarragon chicken salad, grilled items like hot dogs and hamburgers, and daily specialty items such as curried lamb will be included also.

Menus will be tailored to specific diets. For instance, cardiac patients won't ha[illegible]some of the higher fat or high sod[illegible] alternatives such as hot dogs printed on their menus. "The menu selection sheets will be part of an educational plan we have designed for the patient," said Ms. Doherty. "The goal is to take a positive approach to teaching patients what they can eat on a restricted diet. Every day patients will repeatedly see foods that they are allowed to eat. This will enforce the idea that they can enjoy food, despite dietary restrictions."

In the kitchen the cooks will prepare food until it is only partially done and then cool it very quickly. The process of partial cooking and re-thermalization by microwave, said Ms. Doherty, will be the most difficult adjustment for her staff. "We are so used to looking at hot chicken, smooth gravy, and whipped potatoes that are soft and fluffy," she said. "Now the gravy will be congealed and the meat hard and cold. And the vegetables won't be cooked at all." The cooking process will be completed on the patient floor by a high powered microwave.

Other changes have been made to ensure efficiency, decrease waste, and cut costs. For instance, ingredients for standardized recipes will be weighed and measured in an ingredients room before they go to the cook. "To make potato salad, for instance, you take [illegible] raw potatoes to the ingredients room to get them peeled and cut," said Ms. Doherty. "Then they go to the hot station to get cooked. They come back to the ingredients room and get weighed as cooked weight and chopped. Finally, they get combined and prepared for service in the cold room." (The kitchen's cold room is where all salads and cold sandwiches are prepared.)

The system is designed to keep food at a specific temperature at all times to prevent spoilage. In the hot food areas specially designed kettles that act like double boilers cook foods under high pressure steam. The kettles are designed to cool the food quickly by releasing the steam after cooking and circulating cold water through the vacuum space between the two layers of steel. The food is then transferred to a blast chiller. The entire cooling-down process takes about 20 minutes. Noted Ms. Doherty, "You want to stop the cooking process quickly, and for food safety, you want to pull the temperature down very fast."

After the food leaves the blast chiller, it is stored in large refrigerators. The food goes to the tray assembly area from the storage refrigerators. Here all of the trays are prepared according to the patient's menu. The food is then stored on trucks to be wheeled to the floors, microwaved to finish the cooking process, and then served to patients.

A new position called the Nutrition Service Coordinator has been created in the Department of Dietetics. This position is a key link between the department and the patient. The Nutrition Service Coordinator will distribute and explain menus to patients, then collect the menus. The coordinator will also microwave and distribute the food to patients. "The Nutrition Service Coordinator is the person who will have the most contact with patients," said Ms. Doherty. "Because they are on the unit and interacting with the Clinical Dietitian, they will better know a patient's needs."

In addition to efficiency and food safety, the new kitchen is designed for the safety of the department's employees. A blue line along every wall of the kitchen reminds employees to avoid back injury by not to lifting above the line anything more than 25 pounds. As well, food preparation areas have been designed to minimize reaching, bending, and lifting.

The new food service system will begin in January but will not be completed until 1995. The plans include renovation of the employee cafeteria in the White Building ba[illegible]ent.

MGHers were a hoot on Halloween

If these employees have their way, Halloween costume will become MGH custom.

The MGH HOTLINE is published once every three weeks by the MGH News Office.

William E. Walch, *Vice President for Resource Development and Public Affairs*

Martin S. Bander, *Director of News and Public Affairs*

Kennetha J. Bigham, *Editor*

Five-digit dialing

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you must update the automatic dialer to include the appropriate prefix. If an alarm dials outside the MGH, no change is necessary.

Service pins

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Nancy E. Petropoulous, *Nursing*
Anne L. Pietrantoni, *Nursing*
Edward K. Plant, *Bio-Medical Tech Support*
Eileen P. Poole, *Nursing*
Mary C. Pope, *Computer Center*
Lisa E. Possell, *Nursing*
Sheila M. Preece, *Nursing*
Jacquelin M. Presswood, *Nursing*
Edeline C. Prevost, *Clinical Adminstration*
William P. Puricelli, *Blood Transfusion Service*
Timothy J. Quigley, *Respiratory Care*
Linda B. Renault, *Nursing*
Doreen A. Reposa, *Respiratory Care*
Melinda Repucci, *Environmental Services*
Miguelina Rivera, *Chelsea Health Center*
Pamela Rivera, *Communications*
Patricia F. Roach, *Nursing*
Phyllis J. Robertson, *Social Service*
Lois R. Robillard, *Credit & Collection*
Meredith L. Robinson, *Blood Transfusion Service*
Charles Rosa, *Environmental Services*
Susan A. Roux, *Nursing*
Mary E. Rowe, *Molecular Biology*
Patricia O. Rowell, *Volunteer Dept*
Brian Roy, *Chest Physical Therapy*
Kristine H. Roy, *Nursing*
Patricia A. Ruiz, *Chelsea Health Center*
Nell Salm, *Chelsea Health Center*
Joanne M. Sawyer, *Nursing*

Warren prize

from page 1

mechanism and structure of a ribozyme." Both are Investigators with the Howard Hughes Medical Institute Laboratory at their respective school.

Kristin J. Scanlon, *Nursing*
Robert J. Scannell, *Respiratory Care*
Annette M. Scarlett, *Materials Management*
Patricia A. Sedenger, *Nursing*
Noreen A. Selvage, *Nursing*
Yinyee Seto, *Molecular Biology*
Chris L. Sharrett, *Nursing*
Hazel A. Smith, *Nursing*
Karen Smith, *Nursing*
Norma Soto, *General Medicine*
Martha C. Southworth, *Social Service*
Nancy J. Speroni, *Radiology*
Donna M. Stamatis, *Nursing*
Janet M. Steele, *Infectious Disease*
Deborah L. Sullivan, *Dietetics*
Karen R. Sullivan, *Nursing*
Eleanor I. Sundquist, *Oral & Maxillofacial Surgery*
Kathleen A. Sweeney, *Cardiac*
Rhoda K. Taschioglou, *Resources & Development*
Peter J. Tatarian, *Pharmacy*
Susan M. Taylor, *Psychiatric Ambulatory Care*
Nancy M. Terres, *Institute of Health Professions*
Paulette J. Thabault, *Women's Health Associates*
Virginia G. Thornton, *Parking & Commuter Services*
Mary B. Tosches, *Nursing*
Kelley J. Totten, *Nursing*
Jacquelin A. Travers, *Radiation Medicine*
Thanh V. Truong, *Pharmacy*
Pamela J. Tupper, *Renal Research Unit*
Donna M. Vadala, *Cardiac*
Elizabeth A. Vartabedian, *MGH Surgical Associates*
Gregory R. Walker, *Radiology*
Harriett J. Walker-Newton, *Cardiac Cath*
Ellen T. Walsh, *Nursing*
Susan L. Warchal, *Nursing*
Susan E. Webb, *Nursing*
Mary C. Whelan, *Orthopaedic Research*
Deborah Wiebe, *Peripheral Vascular Lab*
Millicent M. Williams, *Environmental Services*
Barbara A. Wilson, *Reading Disabilities*
Janet Wilson, *Rehabilitation*
Amy B. Wong, *Blood Transfusion Service*
Karen Yolfa, *Anesthesia*
Lorraine P. Zoda, *Blood Transfusion Service*

Season's Greetings

MGH HOTLINE

14 December 1989

A publication of the
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Bartlett 9, Extension 2206

Penelope Kirk, President of Daylight Daycare, Inc., shares photos of the Captains Quarters at the Navy Yard with Dr. Maria Lopez-Bresnahan of Neurology.

The MGH is expecting a child care center next year

"Maintaining a tradition of being a great place to work." That, said Richard Montgomery, Assistant Director of Human Resources, is why the MGH is providing a child care service for its employees.

Dr. Buchanan and the Board of Trustees have approved the construction of The MGH Child Care Center at the Captains Quarters at the Charlestown Navy Yard. The historic facility will accommodate 80 children up to five years of age. Daylight Daycare, Inc., an established child care provider, and an advisory committee of parents will oversee the management of the center which is scheduled to open in February.

Changing demographics suggest that women will continue to make up a growing percentage of the work force in the 1990s and beyond. Currently, 65 percent of the work force at the MGH is female and of that number 55 percent is of childbearing age (between 16 and 44 years of age.) And both men and women are increasingly forsaking the corporate climb to spend more time with their families. To keep valued employees in the workplace, companies must find ways to support parents who work. "The establishment of a child care center makes a very strong statement to the community and to the work force that there is appropriate recognition at the MGH that child care has become a national social issue," said Mr. Montgomery. "As an employer, the MGH is trying to be sensitive to the needs of its employees."

Providing high quality, affordable child care is one way of showing such sensitivity. In fact, to ensure that child care is affordable to an economic cross section of employees, the Department of Human Resources has reserved two thirds of the child care slots for families of moderate or low income. Fees are on a sliding scale based on income.

The MGH began its search for a child care location almost two years ago. The administration considered space at the Old West Church, St. Joseph's Catholic Church, and Building 149. "We also explored every single possibility on the main

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Working it out

MGH employees graduate from new program called Working!

Pat George, an employee in Utilization Management, started working at the MGH a year ago. This was her first job after college. "There are some things that come with time and experience," she said. "But I didn't want to wait."

Ms. George put her impatience to work by signing up for a productivity course offered by Training and Development. *Working!* is designed to improve employees' interpersonal and leadership skills.

On Halloween, the first group of MGHers graduated from the program and received their certificates of completion. Martha Byington, Assistant General Director/Patient Services and Dr. Rick Von Reuden, Deputy to the General Director, officiated at the ceremony.

Working! seeks to empower employees with communications and interpersonal skills that help improve productivity on the job. The program teaches participants, among other skills, how to give feedback, listen effectively, and resolve conflict. Cynthia Urbytes, Department Secretary in the Division of Research Affairs, said, "We are here to provide a service to people. In my job, communicating

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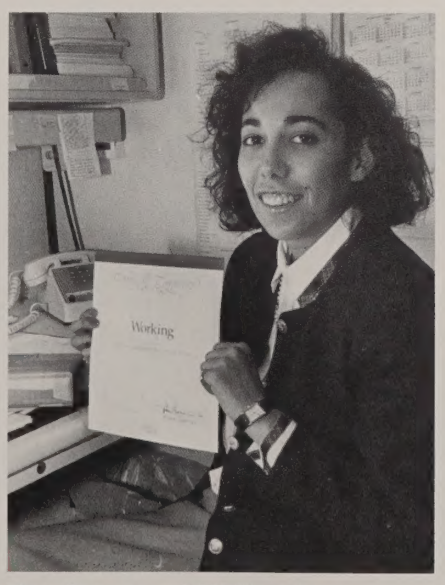

Pat George of Utilization Management sports her Working! Certificate of Completion. She said of the course, "I would recommend it to everyone because it teaches you how to deal with a person as an individual, not as a subordinate or a superior."

Inside

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Dr. Nardi, respected MGH surgeon, dies at 66

Dr. George L. Nardi, 66, internationally renowned surgeon at the MGH and an expert on diseases of the pancreas, died at the hospital last week. Dedicated to the MGH, he also served and chaired hospital committees until recently.

Dr. Nardi, who at age 21 was to be one of the youngest persons ever to receive an M.D. from the University of Chicago, spent his entire professional career at the MGH, where his skills as a surgeon attracted patients from all over the world. He was also responsible for a number of medical discoveries. He was the first to describe the urinary loss of substances [amino acids] essential for the regrowth of proteins in severely burned patients, and he was the first to point out the relationship between inflammation of the pancreas and overactivity of the parathyroid gland.

He performed the first emergency operation at the MGH to relieve coronary arteriosclerosis [endarterectomy], and he was the first at the hospital to interpose a portion of the colon to replace a section of esophagus removed because of cancer.

For many years, Dr. Nardi maintained a laboratory at the MGH for exploring diseases of the pancreas. Here, in 1963, he led the surgical team which was first able to remove an animal pancreas and artificially keep it alive outside the body for closer study of its function. In addition to working to advance diagnostic and surgical techniques to combat diseases of the pancreas, he also led investigations into the use of X-ray therapy for pancreatic cancer. In this "intraoperative radiotherapy" he surgically exposed the cancer so that radiotherapists could bombard it directly with radioactivity.

In 1958, he received the R. Franklin Carter Foundation Award for the "most significant contribution to biliary tract research" during the preceding year.

In addition to his energetic pursuits of medical knowledge at the MGH, an international bent was always part of his career. Born in Bologna, Italy of naturalized American parents who had originally emigrated from Italy, he fostered the post-graduate training of young Italian physicians. In a 1948 trip to Europe during his MGH residency years, he had noted the great postwar need for doctors in Italy and the lack of adequate training facilities for the many who were then enrolled in medical schools.

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Working!

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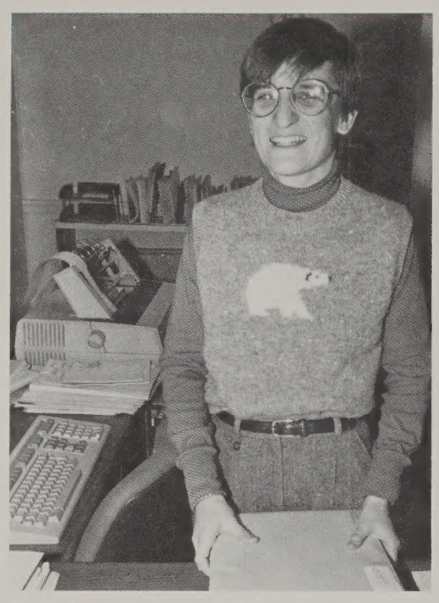
with a variety of people is key to doing that. I took the course because I want to do the best job I can."

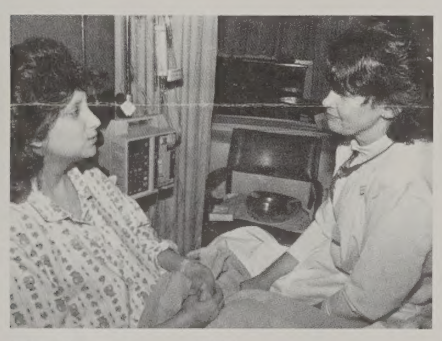
The program is interactive with a strong emphasis on practicing the skills that are being learned. Class participants often practice difficult situations and then give each other feedback on how they handled them. Not only does this approach develop and broaden skills but it also offers a chance to network with employees from other areas of the hospital.

And most importantly, said Leola Rolle, Assistant Technician in the Blood Transfusion Service, "The program helps you discover your strengths and teaches you what to do about your weaknesses."

Look for the *Working!* schedule on the winter Training and Development Calender or call the department's new program hotline (932-5356) from your push-button phone for complete program information.



Cynthia Urbytes, Department Secretary in the Division of Research Affairs, said that the program Working! will help her to excel.



Sheila Brown, RN, a recent graduate of Working!, talks with patient Tara Panacese, 15, of Milford.

For Leola Rolle, an Assistant Blood Technician, Working! has helped her better communicate with patients and coworkers.

Child care

from page 1

campus," said Mr. Montgomery. "Ideally we wanted the child care center right here so parents could be closer to their children."

But the site at the Captains Quarters was worth waiting for. The building is constructed of brick and stone in the neoclassical revival style of the 1800's. It has been restored with its original 19th century balustrades, hallways, and wood floors. And almost every room has a fireplace. Though fireplaces have been sealed off for safety, they add aesthetically to the home-like atmosphere.

The center will meet strict safety requirements. "One of the most challenging parts of this project was making sure that the space met the stringent requirements established for child care centers by the commonwealth's Office for Children," said Mr. Montgomery. "But it is a blessing that those strict regulations are in place."

For instance, every trace of lead paint had to be removed from the building, and the MGH had to ensure that there were ramps installed on the first floor so that, in case of fire, cribs could be quickly rolled out to safety. And because the Captains Quarters is an historic building, changes to ensure safety could not detract from its original facade.

Funds for construction of the child care center were set aside more than a year ago, and Human Resources hopes to operate the center on a break-even basis.

When full, the center will be staffed by 25 child care professionals including a director, 12 certified teachers, and child care workers with backgrounds in early childhood development, developmental psychology, and social service. Only a few employees have been hired, and Penelope Kirk, M.Ed., President of Daylight Daycare, Inc., plans to employ art and music teachers as well as employees who are bilingual in Spanish or French.

continued on page 4

What's happening

Dr. Parrish is Laser Center Distinguished Lecturer

Dr. John A. Parrish, Director of the Wellman Laboratories at the MGH and Professor and Chairman of the Department of Dermatology at Harvard Medical School, is the first Distinguished Lecturer of The Harvard Medical Laser Center. Dr. Parrish, who is also Director of the new MGH-Harvard Cutaneous Biology Research Center, will speak on "The Future Uses of Lasers in Medicine," on January 25, 1990, at 4:00 pm in the Medical Education Center Amphitheater at Harvard Medical School, 260 Longwood

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Nardi

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That trip, which also had included observing surgery in England, Sweden, and Denmark, was a prelude to his doing research as a Harvard Milton Fellow at the University of California's Donner Laboratory at Berkeley and New York's Sloan-Kettering Institute.

In his later years, with an international reputation established and many patients from foreign countries, Dr. Nardi was awarded honorary memberships in surgical societies in Italy, Argentina, Bolivia, and France. He held visiting professorships in Egypt, France, and Poland, in addition to a number of universities and medical centers in the United States.

In 1974 he was named a Fellow of the Royal Society of Medicine in England and in 1988 was awarded the Order of Cavaliere of the Republic of Italy.

"He was well known and highly thought of around the world by many people — younger surgeons whom he had helped," said Dr. Paul S. Russell, Chief of the MGH Transplant Unit and a friend of Dr. Nardi's for 40 years. "He has been admired and trusted for his surgical abilities and for his humaneness. Many have felt that he was helpful to them in their personal lives.

"Patients felt very much the same way," Dr. Russell added. "His patients were particularly loyal to him." Dr. Russell, who joined the MGH house staff two years after Dr. Nardi, recalled that he had come to the MGH largely because of Dr. Nardi's positive reports about the hospital.

In his younger days, Dr. Nardi also was something of a prankster, Dr. Russell noted. "For instance," he said, recalling their days as MGH residents, "I would be sleeping exhausted in my bed at some time of night and, if George was off that night, he might come in and put a firecracker under the door. The thing would go off, and I knew Nardi was back home."

After receiving his B.S. at the age of 18 from the University of Chicago and his M.D. from that school in 1944, Dr. Nardi served a surgery internship at MGH in 1944-45. He then entered the Navy as a medical officer on a destroyer, but the war ended while his ship was still in mid-Pacific steaming for Okinawa. After brief stateside naval duty, he returned to the MGH for his residency training in surgery and joined the surgical staff in 1952. At the same time he was appointed an Instructor in Surgery at Harvard Medical School.

Dr. Nardi served as President of the Boston Surgical Society in 1988-89, President of the U.S. Section of Collegium Internationale Chirurgiae Digestivae in 1983-84, and President of the Northeast Medical Association in 1979. He also received the Distinguished Service Award of the Medical Alumni Association of the University of Chicago in 1979. In 1972, Dr. Nardi was Vice-Chairman of the American Board of Surgery and Chairman of the Board's Task Force on Continuing Surgical Assessment.

He was Chairman of the MGH Staff Associates in 1973 and served as Chairman of the hospital's General Executive Committee in 1972. He also was President of the MGH Italian Alumni Association in 1986.

Dr. W. Gerald Austen, Chief of Surgical Services at the MGH, noted that Dr. Nardi "was one of the best liked people in the hospital, and he was very much admired for his common sense and fair approach to problems. I frequently asked him to serve on committees where that mature judgment was important."

A distinguished contributor to medical literature with nearly 200 titles to his credit, Dr. Nardi was co-editor of four editions of the encyclopaedic Surgery: Essentials of Clinical Practice, as well as being the author of a number of the volume's articles. He also translated into English two books on surgery by Italian authors and made four motion picture films on surgery, two for the American College of Surgeons. Dr. Nardi had served on the editorial boards of Surgery from 1976 and Urgentis Chirurgiae Commentaria of Italy from 1985.

A resident of Boston, he is survived by his wife Sally, whom he met at the MGH where she was training in the Dietetics Department; also by his sons George and Edward, who live in the Boston area; and daughters Elizabeth Kanter of Waquoit, Mass.; Linda Gilman, West Buxton, Me.; and Sally Jean Nardi, a graduate student at Columbia University in New York City. He also leaves seven grandchildren.

Happy Holidays

What's happening

from page 2

Avenue. A reception will immediately follow his lecture. For more information, call The Harvard Medical Laser Center at 735-3165.

Burn Support Group

The Sumner G. Redstone Burn Center now offers a Burn Support Group for MGH patients and their families. The group provides a forum for patients anticipating discharge or who have already returned home or to work. Group discussion is facilitated by Gail Gaffey, a psychiatric clinical nurse specialist, and Sara Ramirez, a clinical social worker.

The Burn Support Group meets twice monthly on Tuesday from 3:00 pm - 4:15 pm. MGH patients who have been affected by a burn injury, and their families and friends are welcome. If you are interested or have questions about the group, please contact Sara Ramirez, LICSW, at ext. 2618, or Gail Gaffey, RN, CS at ext. 1740.

Researchers need volunteers

The Reproductive Endocrine Unit needs healthy women, ages 18-40 years, with regular menstrual cycles and taking no medications, to participate in ongoing research studies. Compensation is available. Call Helen Whitney, RN, at ext. 5387.

Research study targets anxiety disorder

The Anxiety Research Unit is exploring new ways to help people with a type of anxiety called Generalized Anxiety Disorder (GAD). GAD sufferers worry excessively about issues or problems that most people would find unimportant. They often experience physical symptoms such as trembling, nausea, shortness of breath, muscle tension, insomnia, and general irritability. People with GAD may be eligible to participate in a treatment program with a new medication. Before treatment, patients receive careful evaluation including a physical exam, an ECG, and lab tests, all at no cost. For further information, please call Kathy Kelly at 726-3488.

Make a joyful noise in the WACC Lobby

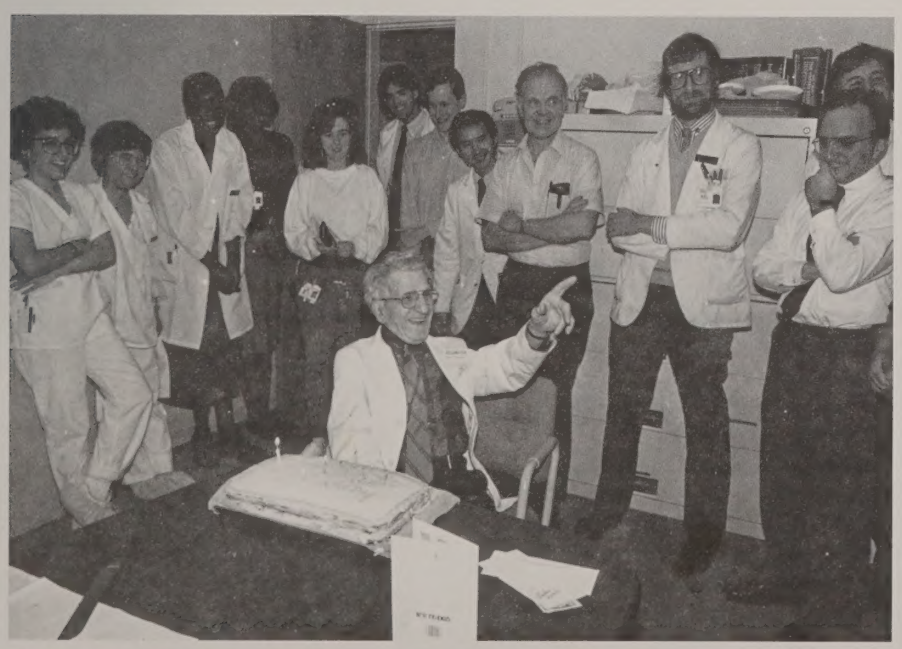
The MGH Christmas Band invites instrumentalists to join in caroling this year. The Sing for Survival Chorus, a group composed of staff, patients and their families and sponsored by the MGH Chaplaincy will perform. The band will lead revelers in song in the WACC Lobby from noon - 1:00 pm on the following dates:

Wednesday, December 20
Thursday, December 21
Friday, December 22

Instrumentalists can join the band for any of the performances. Call Yolanta Kovalko in the Chaplaincy Department at ext. 2220 for more information.

Society celebrates 75th and honors Dr. Haber

This fall, The Paul Dudley White Society celebrated the 75th Anniversary of the founding of the Cardiac Unit of the MGH by Dr. White in 1914 and honored Dr. Edgar Haber, Chief of the Cardiac Unit from 1964 to 1987. Dr. Haber is now President of the Bristol-Myers Squibb Institute for Medical Research. Many MGH researchers, past and present, spoke about advances in the understanding and treatment of cardiac disease. A dinner followed at the Charles Hotel in Cambridge.



Pharmacy hosted a birthday party for Maurice (Morris) Greenbaum, a volunteer in the department for 15 years. "He's cute and lovable," said Pharmacist Beth Harmon, "and we just wanted to show him our appreciation." Carol Bonsignore of Pharmacy made the birthday cake, and Gil Hoss contributed a black forest cake with brandy frosting. There were also other goodies including brownies, Morris' favorite.

Celebrations around the world

As we celebrate the holidays at the MGH, remember that we don't celebrate alone. The winter months are a time for celebration all over the world. Here MGH employees, members of our global family, tell how they celebrate the holidays.

In China, a Festival of Lights

Chai Ling, of the Department of Molecular Biology said that Chinese celebrate the "Festival of Lights" which occurs in January. They decorate their houses with paper lanterns and "Trees of Light" (similar to our own Christmas trees). On the eve of the festival, the children are allowed to play throughout the night. This time is also called the "Passing Year Holiday" and is a time for family gatherings and gift giving.

Christmas in Colombia

Colombians celebrate Christmas and New Years, said Soledad Cepeda of Anesthesia. From December 16 to 24 Catholics in Colombia say a different prayer for each day of the Virgin Mary's pregnancy. The children build nativity scenes as large as an entire house. Their favorite holiday foods include *Ajiaco*, a soup made of chicken, corn, and *guasco* leaves; yellow sweet potatoes; and *tamal*, a combination of meat, rice and vegetables wrapped in a banana leaf and boiled. Colombians also decorate their homes with Christmas trees.

Chanukah

Chanukah means "The Festival of Lights" and is celebrated for eight days. Traditionally, children receive small gifts from their parents. In the olden days, said Beverly Lasovik of Employee Relations, the children received small gold coins. "Each night as a child," she said, "I got a little gift."

And on each night of Chanukah she also lit a candle on the Menorah. The Menorah has nine candles of different colors. The lighting of the Menorah signifies the "Miracle of Lights" and the triumph of the Maccabees over the Syrians in 164 B.C. At that time, the Maccabees were defending the temple in Jerusalem where the holy light burned constantly. However, the Maccabees were short on oil and only expected the candle to remain lit for a few days. The miracle was that the candle stayed lit for eight days. Each candle on the Menorah signifies one of the eight days. The ninth candle is called the *Shamas*. It is lit first and then used to light the others.

Latke, a potato pancake, is a traditional Chanukah food. And a traditional game employs a *dreidel*, a four-sided spinning top with a letter of the Hebrew alphabet on each side.

Parang sets the mood in Trinidad

In Trinidad, said Gloria Pierre of Admitting, the holidays are marked with singing and the playing of the traditional *Parang* music. "It is very melodious," said Ms. Pierre.

Lohri

Diwan Singh of Parking and Commuting Services said that one of the winter celebrations of rural people in India is called Lohri. Newlyweds and new parents gather with their neighbors around a huge bonfire. They sing in celebration of the winter season, give gifts, and celebrate with favorite foods. One of those favorite foods is popcorn.

Kwanza

From December 26 to January 1 many African Americans celebrate Kwanza, which means "the first fruits of the harvest" in the East African language of Kiswahili. There are seven principles of Kwanza which are recognized by lighting a candle on each day of the celebration—the first is *Umoja* (unity); then *Kujichagulia* (self determination); *Ujima* (responsibility); *Ujamaa* (cooperative economics); *Nia* (purpose); *Kuumba* (creativity); and finally *Imani* (faith). Gifts between family and friends are also exchanged, and it is a time for celebration of their African heritage.

New Years greetings from Japan

Dr. Jun Teruya of Surgery said that though most Japanese do not practice a religion, Christmas is one of their favorite holidays. They decorate their homes, sing carols, and exchange gifts. For New Years, they send cards called *Nengajo* to family and friends. They also have a priest called *Hoteiosha* who acts much like our Santa Claus.

Diwali

Diwali is a combined celebration of the Hindus and Sikhs in India which marks the New Year. Diwali encompasses six days of prayer and

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Child care

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The MGH Department of Human Resources will hire child care center staff with the assistance of Daylight Daycare.

Ms. Kirk brings to the MGH a background in special needs and early childhood education. She has inspected and directed and created child care centers and is Chairman of the Daycare Committee of the West Suburban Council for Children.

The MGH Child Care Center will provide a nurturing and educational environment. "This is anything but a baby sitting service," said Mr. Montgomery. "It is a developmental program with an educational base being provided in a nurturing homelike environment. The programs are designed to stimulate the intellectual, social, and emotional growth of the children."

In fact, the MGH Child Care Center will bring to bear some of essayist Robert Fulghum's advice. He wrote, "Everything I needed to know about how to live and what to do and how to be I learned in kindergarten. Share everything. Play fair. Don't hit people...."

"Be aware of wonder."

The MGH Child Care Center teaching staff will employ a curriculum tied to the seasons. For instance, children might collect leaves in the fall, observe the changing forms of water in the winter, or learn about the colors of spring flowers.

"Warm cookies and cold milk are good for you."

A child's day might consist of directed play time, activities such as art, science, or cooking projects, a mid-morning snack which the children will often create, and lunch at noon. There also will be the traditional afternoon rest time.

Parents must bring lunches and formula for their children. The center is equipped with kitchenettes to enable staff to prepare and store the children's food.

"Live a balanced life—learn some and think some and draw and paint and sing and dance and play and work every day some. Take a nap every afternoon."

A room on the third floor of the Captains Quarters will be used for dance and tumbling, and the center has three different outdoor play areas. Daylight Daycare and the director of the center will arrange monthly enrichment programs which will include visits from artists, musicians, botanists, and health-care providers, to name a few. The child care center will not have television sets. The staff will occasionally use slide projected stories and will often read to the children. Other amenities include handmade blankets that Daylight Daycare will provide for the younger children.

"Put things back where you found them. Clean up your own mess. Don't take things that aren't yours. Say you're sorry when you hurt somebody. Wash your hands before you eat. Flush."

To ensure the safety of all children, sick children must remain at home. The MGH Children's Service and the Bunker Hill Pediatric and Emergency Units will provide medical screenings and emergency care.

If you are concerned about discipline, you needn't worry about the use of corporal or verbal punishment. They are absolutely out at the MGH Child Care Center. In fact, Daylight Daycare's philosophy is that even time-outs are too punitive. "We want to develop an atmosphere of trust and contentment," Ms. Kirk said. "You do that by setting a tone that the teachers are always supportive of the children."

When you go out into the world, watch out for traffic, hold hands, and stick together."

The center is open from 6:15 am to 5:45 pm Monday through Friday, and parking will be available for parents using the center. The parking garage is located directly across the street from the center, and parents will be able to drop off their children, park their cars in the garage, and catch the shuttle to the main campus.

The Department of Human Resources is accepting applications for full-time and part-time child care slots which will be filled on a first come, first serve basis. You may obtain an application from the Employee Records Office on Bulfinch 2, the Human Resources Office at MGH East, or by simply dialing the department's 24-hour child care hotline at 617-932-5357. For information about the center's staffing or programs, call Ms. Kirk at Daylight Daycare, Inc., at 617-891-9461.

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Celebration

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celebration. People decorate their homes, said Firbosh Pathan of Pharmacy. And many set off firecrackers. *Sal Mubarak* marks the end of the festival.

Christmas Boats in Greece

Greeks, said Yannis Demertzis of the Clinical Neurophysiology Lab, decorate replicas of boats instead of evergreen trees on Christmas. A traditional food is a Christmas cake which contains a gold coin. Whoever gets the section with the coin can be assured of prosperity in the New Year.

The holiest of days

India has the third largest Moslem population in the world. And each year, Moslems all over the world, recognize their holiest of days, Id, which follows the month of Ramadan. Moslems fast between sunrise and sunset for 30 days during Ramadan, denying themselves even water. They also donate money to the poor. In India, they break their fast with fruit and *Shirkhurma*, a favorite dish made of milk, dates, and other dried fruits.

Lady Befana arrives on a broom in Italy

In Italy the equivalent of Santa Claus is the Lady Befana, said Serena Mobilio of Dermatology. On January 6, Lady Befana (Epiphany in Italian) arrives on her broom and places gifts in the children's stockings. If she thinks the child has been bad, she leaves a piece of coal instead.

In Haiti, no Santa but lots of celebration

Luc P. Dumornay of Environmental Services says Haitians celebrate Christmas in much the same way that we do in the United States. The one difference is the lack of evergreens in Haiti, and Santa Claus is left out of the festivities.

There are religious observances, singing, gift giving, and, of course, a Christmas dinner. Holiday foods include fried bananas and an assortment of vegetable and meat dishes.

Retirements

Jeff Davis, Assistant General Director for Support Services, presents Bernard Speaks with a picture of the Bulfinch Building at Mr. Speaks' retirement party earlier this month. Bill Banchiere (rear), Director of Environmental Services; Steve Kauffman, Associate General Director; and a host of other well wishers were there to honor Mr. Speaks, who has worked for the hospital for 26 years.

Friends joined Jenny Cartolano to celebrate her retirement. From left are Luevenuie Frazier, Rose Whyte, Ms. Cartolano, and Frances Edwards.

Correction

The story entitled "Warren Prize often heralds Nobel" which ran in the November 23 issue of the Hotline said that Dr. Joan Steitz was the first woman to win the Warren Triennial Award. In fact, several other women have received the award including the MGH's own Dr. Mary L. Stephenson of the Arthritis Research Unit.